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DEPARTMENT OF



ANNUAL REPORT
1975

JAMES A. BUFORD, M.P.H.
DIRECTOR

Newark

Kenneth A. Gibson
Mayor

Department of Health and Welfare

2 Cedar Street
Newark, New Jersey 07102
201 733-6430

James A. Buford, M.P.H.
Director

March
1st
1976

Honorable Kenneth A. Gibson &
Newark Municipal Council
City Hall
Newark, New Jersey

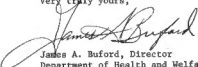
Dear Sirs:

Enclosed is the 1975 Annual Report for the Department of Health and Welfare pursuant to City Code 2:4-1 and State Statute 40:187-5.

The current report is respectfully submitted with the request that cognizance be taken of accomplishments, important developments and the future direction of the Department. Substantial progress has been made and this Report provides a timely opportunity to demonstrate the incorporation of programmatic and administrative changes that have been implemented.

The essence of this Annual Report, I am pleased to note, is that the Department has made substantial and impressive progress. The task ahead is to bring to fruition a Department designed to advance the effectiveness and quality of services available to the residents of Newark.

Very truly yours,



James A. Buford, Director
Department of Health and Welfare

JAB:nj

"...the health of no population has been well served, no matter how enlightened and innovative the private market systems, and no matter how vigorous the work of voluntary agencies, without the existence of an agency of government committed to the healthful well-being of its constituents as the core of the endeavor."

American Journal of Public Health, "Issues of Health Policy: Local Government and the Public's Health". 'COMMENTARIES', 65, no. 12 (December, 1975), pp. 1333

CITY OF NEWARK

KENNETH A. GIBSON, MAYOR

MEMBERS OF CITY COUNCIL

EARL HARRIS, PRESIDENT

JESSE ALLEN
MICHAEL P. BOTTONI
ANTHONY CARRINO
ANTHONY J. GIULIANO
SHARPE JAMES
HENRY MARTINEZ
DONALD TUCKER
MARIE A. VILLANI

WILLIAM H. WALLS
BUSINESS ADMINISTRATOR

DEPARTMENT OF HEALTH AND WELFARE

JAMES A. BUFORD, DIRECTOR

NEWARK DEPARTMENT OF HEALTH AND WELFARE

1975 ANNUAL REPORT

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INTRODUCTION

The nature of the Department of Health and Welfare is uniquely dynamic. The number, size, finances, and funding sources of services and programs being administered changes considerably over time. The Department must have an organizational structure which is appropriately flexible to meet the needs developing from these changes and to avoid various administrative difficulties.

The major thrust of the Department is to review the current organizational structure and introduce revisions to satisfy changing needs. To reorganize the Department of Health and Welfare in an effort to more effectively discharge statutory requirements and to accommodate new and expanded projects is a priority concern and goal.

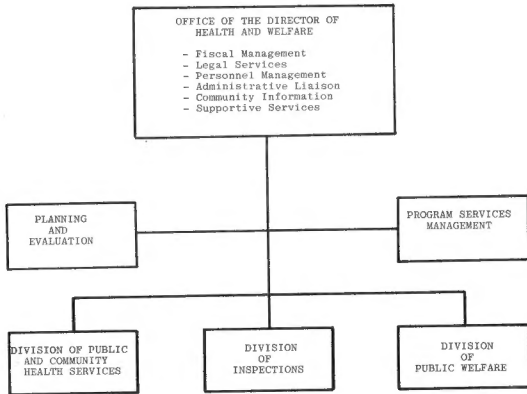
Given a specific line of authority and a distinct assignment of responsibility, the Director with the cooperation and assistance of the division and project directors must create a mode of management. The basic aspect of this approach includes the delegation of authority, a procedure for establishing goals, a procedure for reaching decisions and a plan to communicate. Effective implementation of this approach will result in a dynamic, flexible, responsive, spirited and productive professional management team.

The organizational structure reflects the Director's preference for delegating responsibility to a broad and strong management team for the purpose of administering the internal and external affairs of the Department. Such an organizational approach is essential to the effective, productive administration of any large, complex organization requiring the application of a broad spectrum of highly technical programs.

The Departmental organization plan is simple and can contribute to better planning, greater flexibility, more formal decisions and puts the responsibility and authority for decision-making closer in each case to the scene of the problem where complete understanding and prompt action are possible.

Our approach to management is indeed sound, functional and minimizes duplication, fragmentation and unnecessary overlaps, while simultaneously providing for more efficient utilization of existing staff.

ORGANIZATION FOR THE ADMINISTRATION
OF THE
DEPARTMENT OF HEALTH AND WELFARE



DIVISION OF PLANNING AND EVALUATION

Mr. Carl W. Wilson
DIRECTOR

THE NEWARK HEALTH PLANNING AGENCY

Carl W. Wilson, M.P.H.

The Newark Health Planning Agency is a City ordinance health planning agency which plans for the City of Newark. It is designated as a sub-area wide health planning agency under P L. 89 749 through contractual arrangements with the Hospital and Health Planning Council of Metropolitan New Jersey.

This Agency with its 20 member Advisory Council is responsible for reviewing and commenting on all Newark health proposals, seeking Federal, State and Local funds. The decisions which are made on these proposals by the Regional and State Health Planning Agency, considers Newark's contribution when making the final decision.

1975

During 1975 the Newark Health Planning Agency made significant accomplishments in assessing and analyzing the health needs of the community and serving as a coordinating force in exploring problem solutions.

The major areas receiving considerable attention by the Agency were proposal review and comment, technical assistance, and research and development. The following outline summarized the accomplishments of the Newark Health Planning Agency in each of these areas.

Review and Comment

- Reviewed and commented on 44 local health proposals.
- Coordinated proposal reviews with the B Agency's review cycle and provided necessary input at the B Agency Review Committee meetings.

Technical Assistance

Provided technical assistance to the Federal, State and City Health projects in the development of proposals for funding.

- Rendered technical assistance to other community agencies on a more limited basis by providing statistical data and Agency publications.
- Maintained a student intern program with students from New York University and Rutgers University.
- Provided assistance in the planning and development of two Neighborhood Health Centers to be constructed and operational by June of 1976.
- Met with consultants developing long range plans for St. James Hospital and provided detailed local statistical information using the Newark Health District Plan and the Newark Community Health Profile.

Research and Development

1. Agency Health Plan Development

- Convened Fourth Annual Newark Comprehensive Health Planning Conference where more than 500 consumers and providers made input into the development of 1976-77 Newark Comprehensive Health Plan.
- Developed, printed and distributed an urban health journal entitled Viewpoint. This journal consists of a series of position papers written by local consumers and providers stating their positions on how some of Newark's pressing health problems can be solved. Each paper was presented orally at the 1974 Newark Comprehensive Health Planning Conference

2. Studies

- Performed an on-going analysis of Newark's monthly birth data in conjunction with Rutgers University.
- Analyzed the need for a comprehensive alcoholism program in the city including a social setting detoxification program, a counseling program for low income alcoholics and halfway houses for men and women alcoholics.
- Developed and refined the 1975-76 Newark Comprehensive Health Plan. Performed intense statistical research as it related to gathering the necessary back-up information for the plan.

3. Public Issue Involvement

- Co-hosted with the Hospital and Health Planning Council and the area wide county Mental Health Board Administrators, the first Regional Public Mental Health Hearings (Area II Essex, Hudson, Warren and Morris counties) in Newark.
- Convened monthly meetings of the Newark Mental Health Coordinating Committee, for the purpose of planning for city-wide mental health services.
- Convened monthly meetings of the Dental Health Coordinating Committee for the purpose of coordinating dental health plans and services in the city.
- Convened monthly meetings of the Newark Health Planning Advisory Council to take action on local proposals.

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4. Agency Management

- Implemented a new internal Proposal log system including a project control log showing all projects reviewed, dates of reviews and recommendations.
- Received Membership in the Hospital and Health Planning Council's Executive Committee.

5. Data Management

- Analyzed several major health indicators in Newark and made projections for 1980 using the straight line trend projection formula.
- Began revision of the Newark Health District Plan and Street Index in preparation for a second edition.
- Initiated plans for the expansion of the Newark Health District Community Profile.
- Participated in the conferences held by the H.E.W. Regional Data Coordinating Council.
- Delivered a position paper before the Regional Data Coordinating Council on the procedure used for dividing the City of Newark into Health Districts.

MANAGEMENT INFORMATION AND MONITORING SYSTEMS

Marva Washington

The Management Information and Monitoring Unit has the overall responsibility for identifying and providing the Department with efficient mechanisms (manual, semi-automated, automated) for the collection, analyzation, storage and retrieval of data. It must function in-house and in coordination with other city agencies in the monitoring, reporting and evaluation of the programmatic activities of the Department's bureaus, projects and supportive programs.

1975

Before the end of 1975, the Monitoring Unit, the Evaluation Unit and the Management Information Services/Community Health Information System (MIS/CHIS) were combined into one unit, now known as Management Information and Monitoring Systems (MIMS). The major staff component of the new unit was the former monitoring staff, therefore, the majority of the accomplishments this year reflect that staff complement. The unit continued to supervise the monthly monitoring of the bureaus and projects in the Department. MIMS worked in coordination with the Mayor's Policy and Development Office and Newark Systems Agency to develop a uniform monitoring system for HCDA funded projects.

During the year the Unit produced Monthly Synopsis Reports for management, bi-monthly, then quarterly Summary Analysis Reports and coordinated the Department's 1974 Annual Report. Photographs of project activities were added to the Summary Analysis Reports. Technical assistance continued to be provided on an on-going basis. The high lights of this component were a survey conducted for the Urban Rodent and Insect Control Program, a study of homicides occurring in the city from 1970-1975, and our participation in a State On-Site Evaluation of the (7) treatment modality centers under the Multiphasic Drug Treatment Program.

Developmental activities were begun in two areas that will realize completion in 1978, the creation of a Microfilm Laboratory and procedures for maintaining an up-dated Geographic Base File/Dual Independent Map Encoding System (GBF/DIME). Toward the end of the year staff provided enhancement to the Department's Program Hearing System with the Project Director Interview Reports.

The unit continued to supply keypunching services to the Supplemental Food Program - WIC and to other operations on request. The proposal for the computerization of the WIC Program was completed, but only one initial step was completed, the computer edit for over 16,000 keypunched cards. Several electronic data processing firms were contacted regarding available applications related to Management Information and Health Delivery Systems. Summarily the year was one of many changes, some attendant confusion with less achievement of objectives than projected, but a year where we continued to move forward.

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DIVISION OF PROGRAM SERVICES MANAGEMENT

Mr. Robert M. Strand
DIRECTOR

DIVISION OF PROGRAM SERVICES MANAGEMENT

Robert M. Strand

The Division of Program Services Management was developed to coordinate the social service projects under single administrative direction and managerial leadership, conducive with the general operational thrust of the department.

This division is responsible for translating program plans and strategies into operational project designs. Approved programs and projects are initiated by this division which participates in contract negotiations, careful monitoring of performance throughout the year and represents the Director's Office when necessary for resolution of operational matters. Further, the division provides continuous support for the programs and projects, and keeps the Director informed on all matters concerning them.

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NEWARK OFFICE OF ELDERLY AFFAIRS

Robert Strand

Provides comprehensive services for Newark's elderly citizens, i.e. social services, housing and economic development, education and health services, food nutrition services, and transportation services to and from senior citizen centers and for senior activities.

1975 In keeping with the goal and objectives of 1975, the following was accomplished:

In February 1975, the Office of Elderly Affairs received a grant from the Mayor's Office of Manpower - C.E.T.A. II Funds to conduct an employment program for 200 senior residents of Newark for an initial period of twenty one (21) weeks (February 3rd to June 30th, 1975). Senior Citizens, 55 years of age and over, were placed in interesting and meaningful work which matched their skills. A rate of \$3.00 per hour work week was offered the seniors. The program was then extended to June 30, 1976. N.O.E.A. monitors the performance of the seniors, most of whom are homemakers.

N.O.E.A. in conjunction with the Urban Health Institute and St. James Hospital of Newark began operation of a demonstration Preventive Medicine and Health Practice Program, which started in April, 1975 and is conducted at the Ironbound Multi-Purpose Senior Citizen Center at 138 Clifford Street, Newark. The Urban Health Institute is the conduit of all funds. St. James is the back-up hospital for referred patients and N.O.E.A. supplies in-kind space, technical assistance and personnel. The program is designed to increase the senior citizen awareness of the benefits of Preventive Medicine and Health Practice. A registered nurse, who attends the center two days a week, 9:00 a.m. to 4:00 p.m., provides such services as: diagnostic screening for high blood pressure/hypertension, diabetes, eye ailments, preventive health care (flu shots, etc), psycho-social counseling, diet counseling for overweight and diabetic seniors, medication counseling and referrals to private physicians.

June 4, 1975, N.O.E.A. sponsored its "Second Annual Senior Citizen Boat Ride". Transportation was provided by N.O.E.A. for the 1,375 senior citizens who attended the affair.

A 'Christmas Fantasia' celebration was held on December 18, 1975 at the Terrace Ballroom at 1020 Broad Street, Newark. Again, transportation was provided for seniors to and from the Ballroom. A buffet lunch, door prizes, entertainment and a visit from Councilmen of Newark were offered to the 750 seniors that attended.

One of N.O.E.A.'s objectives was to have a Homemaker's program operating by mid-year, but lack of state funds and a delayed review of the proposal package have presented the major obstacles.

Transportation services for Newark's elderly were halted in April of 1975. The cost of \$95.00 per bus day depleted N.O.E.A.'s budget line for transportation in four months. For the remainder of the year, private transportation services (staff) and the Non-Emergency Transportation System were utilized. The office is currently seeking funds from the Essex County Office on Aging and the Urban Mass Transportation Administration for transportation vehicles which could be owned and operated by N.O.E.A. Further funds from the Mayor's Policy and Development Office for contracted services will not be available until March, 1976.

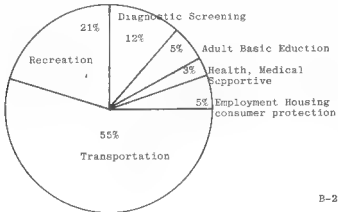
An obstacle to the centralization and control of all funds and services providing for the elderly in the city, was the failure of N.O.E.A. to be designated by the State as an Area Agent Planner. As such, N.O.E.A. would have received and controlled all monies allotted for senior programs in Newark, thus reducing duplication and fragmentation of services.

A projected Meals-on-Wheels Program, as an extension of the existing Title VII Nutrition Program, failed to materialize due to a lack of funds for a pilot program. However, the Nutrition Program for the Elderly increased its daily output of meals per day and opened one additional site.

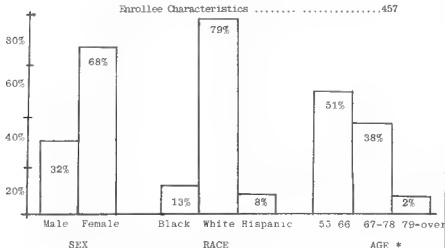
ACTIVITY SUMMARY

The Newark Office of Elderly Affairs, in its second year of operation, provided 20,572 service units to elderly residents, 55 years of age and older, within the city of Newark. The Office increased its clientele with 503 new participants, providing services to approximately 1,183 senior citizens in 1975.

Service Unit Activities 20,572



The Ironbound Multi purpose Senior Citizens Center, which is under the auspices of N.O.E.A. increased its participant enrollment by 133 in 1975 bringing the total number of center participants to 457. The seniors partake of hot lunches, classes in Arts and Crafts, physical fitness, Adult Education, Sewing, Knitting, Crocheting, Carpentry, Dance and Music as well as recreational excursions.



Through the Comprehensive Employment and Training Act (CETA) N.O.E.A. employed a total of 263 senior citizens, 116 males and 147 females

However, during the course of the year, 65 seniors resigned. The government stipulated that in 1975 a senior citizen could earn a maximum of \$2,520.00 before having his/her Social Security and/or Supplemental Security Income (S.S.I.) benefits reduced. Hence, those seniors nearing the maximum resigned and were replaced. The above total reflects the original people employed and their replacements.

* A number of enrollees would not reveal their ages.

NUTRITION PROGRAM FOR THE ELDERLY
Jenice Rankins

The purpose of the Nutrition Program for the Elderly (funded under Title VII, Older Americans Act and regulated by the U.S. Dept. of H.E.W.) is to accomplish the following tasks.

- Provide at least one hot meal per day, five days per week, to residents of Newark who are 60 years of age and over, and with each meal, provide a minimum of one-third the daily recommended dietary allowances
- Establish Outreach activity to assure participation by the maximum number of eligible individuals.
- Provide other supportive services.

1975 The Nutrition Program for the Elderly served a total of 135,307 meals during 1975. The five (5) N.P.E. sites averaged 20 days per month for meal serving and had a combined total of 1,195 meal-days for the year. The average number of daily meals actually served came to 566 for the year. This exceeds the 500 figure because the program was allowed to serve 60 daily meals during part of 1975 in order to use up accruals. The program had a net enrollment of 2,291 seniors with a cost-per-meal average of \$2.28 for the year.

N.P.E. under went three changes in directorship during 1975, which affected administrative continuity but did not hamper overall program operations.

RETIRED SENIOR VOLUNTEER PROGRAM
Virginia Scott

This project was developed to provide an opportunity for Newark's elderly population to participate in, and become a part of, the economic, social and cultural developments of the Newark community. Retired Senior Volunteer Program provides volunteer work assignments and job placement for persons from 60 years of age on up

1975 PROGRAM HIGHLIGHTS Overall management of funds stabilized during 1975, and the program maintained careful control over budget accountability.

Enrollment:

Current RSVP enrollment is 370 volunteers who participate in 31 sites throughout the City of Newark.

Referral Services:

RSVP has referred 50 senior volunteers to CETA and other work sites, thereby enabling them to re-enter the employment mainstream.

Cultural and Social Supportive Services:

Two orientations were held for senior volunteers that brought in representatives from various social agencies to explain their services (e.g. welfare, food stamps, elderly reduced fare, discounts, social security, etc.) RSVP sponsored a Christmas Party that provided a family style setting for seniors who might otherwise have been alone during the holidays. The program also took senior volunteers to attend the National Retired Senior Volunteer Program Conference in Washington, D.C. For additional Volunteer involvement, RSVP has established 3 clubs, the Yarn and Needle Club, an Arts and Crafts Club and the R.S.V.P. Chorus Group.

Support from Community Resources:

Several agencies provided very useful assistance that allowed R.S.V.P. to carry out a more comprehensive program. The Paul Robeson Center provided space for several R.S.V.P. programs, the Office of Elderly Affairs (N O E A) sponsored the bus trip to the National Conference, the Department provided space for orientations and R.S.V.P. received discounts and donations from other agencies.

The program, this year, was able to increase the number of volunteer participants while decreasing the amount of per/volunteer expenses. Volunteers were also limited to working 3 days a week. This too has allowed more people to participate and be reimbursed by the program without expenditures. Additionally, a Non-Reimbursed Volunteer component was established; therefore more seniors were able to participate in R.S.V.P. programs, but on a non-reimbursed basis. The R.S.V.P. Advisory Board operated on a consistent basis during the year, serving in a vital supportive capacity to the program.

CHILD CARE NETWORK

Julia Watson

Provides a network of City Sponsored child care systems that meets the total needs of the child in health, nutrition, education, social and emotional growth, physical fitness and development.

1975

In 1975 the Child Care Network did not fully accomplish all of its objectives due to serious and drastic cutbacks in State and local funding of health services. However, the Child Care Network did implement and accomplish the following:

- Established linkages to other service sub-systems within the Department which strengthened the services of the City funded Day Care Centers.
- Established a Resource-Consultants Working Group, composed of representatives from the State-Bureau of Day Care, the Federal office of Child Development and the Federal-Social and Rehabilitation Service for the purpose of providing the Child Care Network with expert consultation and feedback on approaches or resources.

- Developed an open communication system with M.P.D.O. to jointly meet with the day care directors to discuss and share information and problem solving.
- Provided training services to supplement Family Life Education project, " A Life to Share" a cooperative venture which educated approximately 500 Newark parents on Child rearing techniques. Strengthened the staff capability of the City funded centers with a core group of five child care aides for the purpose of back-up staffing to centers.
- Participated in the 4th Annual Comprehensive Health Conference.
- Insured maximum support to CETA program by improving coordination and reservation of 42 day care slots in City funded system.
- Assisted the City funded centers in the implementation of the Newark System for evaluation and monitoring.
- Provided through staff assistance improved technical assistance and consultation to City funded centers.

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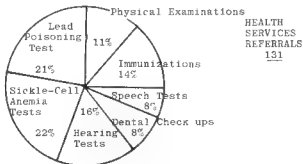
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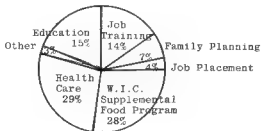
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SERVICE SUMMARY

ENROLLMENT 1,246
 DAY CARE CENTERS FUNDED 18
 CHILDREN SERVED 1975 1,800
 CHILDREN ON WAITING LISTS 2,320
 HEALTH SERVICES 5,300



MEALS SERVED 98,000
 STAFF DEVELOPMENT TRAINING PARTICIPANTS 180
 WORKSHOP 15 Attendance.. 870
 PARENT PARTICIPATION MEETINGS, ETC.....2,562
 PARENT SEMINARS/WORKSHOPS7..... Attendance.1,285
 PARENT REFERRALS TO SUPPORTIVE FAMILY SERVICES ..1,059



DIVISION OF PUBLIC AND COMMUNITY HEALTH SERVICES

.Dr. John B. Waller, Jr.
HEALTH OFFICER

DIVISION OF PUBLIC AND COMMUNITY HEALTH SERVICES
Dr. John B. Waller, Jr

The Health Division has evolved into the Division of Public & Community Health Services. This evolution has enhanced the Department's capabilities to effectively discharge statutory requirements as they relate to recognized public health activities which are prescribed or emanate from the New Jersey Statutes and the State Sanitary Code, and the local health codes as promulgated by the Newark Municipal Council. In addition, the Division is charged with the overall administration and coordination of certain Federally and/or State funded categorical health programs to accomodate an integration of health services

The specific administrative statutes governing the division are found in the Revised Ordinance of the City of Newark, Title 2, Chapter 10, Article 2 (The powers and duties of the Division are enumerated in 2 10-4 (a-b), Title 6, Chapter 1, Title 12, certain sections of Title 13, Title 14; certain sections of Title 17, and New Jersey Statutes Title 26 (Health & Vital Statistics).

The Bureau of Administration, managed by the Physician and Assistant Health Officer, is the administrative apparatus within the division which manages and coordinates the various public and community health programs under the supervision of the Health Officer. Within its administrative responsibility for the fifteen bureaus of the division the bureau manages a variety of operating health programs which are supported by State and/or Federal funds. These programs are coordinated in a manner which tends to maximize their efficiency by integrating them within the existing service delivery modalities for the purpose of building a comprehensive city-wide health services delivery system. This system consists of public, private and voluntary health providers. Further development and refinement of the system will facilitate a comprehensive network of ambulatory care services that are linked in terms of maximum feasibility and utilization of funds, manpower and other appropriate resources.

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BUREAU OF BUILDING MAINTENANCE

Leonard Thomas

The Bureau of Building Maintenance is responsible for the general maintenance and repair of all Divisional buildings, their equipment and grounds. In addition, responsibility extends to housekeeping, internal disaster (safety & fire) and building security.

BUREAU OF VITAL STATISTICS

Nathan Hershkowitz

Sylvia Krotenberg

The Bureau of Vital Statistics performs mandated functions of recording data, issuing official records and collecting fees related to births, deaths and marriages. In addition, the Bureau's record-keeping activities provide the raw data for generating appropriate statistical correlations and analyses for the Department's health information system. These mandated and other functions are coordinated by the staff of one Deputy Registrar of Vital Statistics and five functional sections within the Bureau.

Deputy Registrar Vital Statistics and Public Processing
Section (counter)

- Birth Certificate Section
- Marriage Certificate Section
- Death Certificate Section
- Statistical Processing Section

1975

This Bureau received the following certificates

Births.....	6,430
Deaths.....	3,378
Marriages	2,795

The actual cash receipts for 1975 were \$72,877. The fees for such records are \$2.00 per record and \$1.00 for a Legal Change in Name.

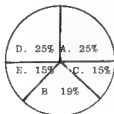
There were 6,430 births or a crude birth rate of 16.9 per M. Newark had 1,109 non-resident births, subtracting this we have an adjusted total of 6,411 Newark births or an adjusted rate of 16.9 per M., also there were 1,090 Newark births that took place out-of-town. Although more of a social than public health problem, the rate of births out-of-wedlock is startling. Of the 3,273 births out-of-wedlock, 2,977 were Newark babies, which means that of the 6,411 Newark babies, over 46.4 per M. live births were reported as births out-of-wedlock.

ACTIVITY SUMMARY

BIRTHS TO NEWARK RESIDENTS..... 5,321

I. Wards

A. North 1,385
 B. East 998
 C. West 804
 D. South 1,356
 E. Central 778



II. Legitimacy:

A. Legitimate
 B. Out of Wedlock

III. Race:

A. White
 B. All Others

IV. Sex

A. Male
 B. Female



V. Place of Birth, 1974 vs 1975

	1974				1975			
	Hospital	Home	Other	Total	Hospital	Home	Other	Total
Resident	5,870	96	10	5,976	5,262	59	0	5,321
Out of Wedlock*	53%	54%	40%	3,190	56%	57%	0	2,977
Non-Resident	1,094	0	4	1,098	1,109	0	0	1,109

* The out of wedlock percentages and total are identified for comparison only, and are a part of the resident total.

March 3, 1976 an article was published in the Star Ledger titled 'U. S. births stay low for second year'. A comparison between the national birth statistics shown in the article and Newark's birth statistics gives some picture of where we are in perspective.

'WASHINGTON (AP) - The nation's birth rate continued at a record low in 1974 as more women waited before starting their families, according to the government figures released yesterday.

The statistics show that the birth rate was 14.9 birth per 1,000 population, the same as 1973, and the fertility rate dropped to a new low of 68.4 live births per 1,000 women...."

Comparative figures for Newark show that the birth rate was 17.9 in 1973 (3% above the national average), 18.6 births per 1,000 population in 1974 (3.7% above the national average) and 16.9 birth per 1,000 population in 1975, yielding an estimated 2% decrease in the birth rate between 1973 and 1975. Newark's fertility rate was 83.4 live births per 1,000 women in 1974 (15% above the national average).

".....The 1974 fertility rate, which is a measurement of birth rates by age of the mother, was 1.2 per cent below 1973. data for the first 10 months of 1975 show a 1.6 per cent decline compared with the same period the previous year."

Newark fertility rate for 1975, 82.4 live births per 1,000 women, represents a 1 per cent decline in the fertility rate between 1974 and 1975.

".....Only .8 per cent of the babies were not delivered by physicians in hospitals."

Newark figures show that 1.5% of the babies were not delivered by physicians in hospitals during 1974, and .9% in 1975. According to the article, the out-of-wedlock birth rate decreased from 24.5 births per 1,000 unmarried women in 1973, to 24.1 per 1,000 in 1974.

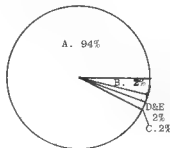
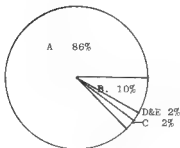
Comparative figures for Newark show a 4.1% increase in the out-of-wedlock birth rate, from 40.4 births per 1,000 in 1973 to 44.5 births per 1,000 in 1974. A smaller increase of 2.0% reflects the difference between the 1974 figure and 46.5 births per 1,000 unmarried women in 1975.

Between 1973 and 1975, a steady increase is seen in Newark's out-of-wedlock birth rate. All other birth rate indicators show an appreciable decrease, the overall birth rate, fertility rate and the number of babies not delivered by physicians in hospitals.

Far more significant decreases, however, are seen in the infant and maternity mortality rates. Between 1973 and 1975, there was a 9.5% decrease in the infant mortality rate: 23.2 in 1973 to 17.9 in 1974 and an indicative low of 13.7 in 1975. The maternal mortality rate per 1,000 deliveries, between 1973 and 1975, reflects a 2% decrease, from .4 to .3 to .2 in 1975

CAUSE OF INFANT DEATHS AMONG NEWARK RESIDENTS (1971-1975 COMPARISON)

	1971		1975
A.	315	Congenital Premature	183
B.	35	All Other	10
C.	8	Pneumonia	4
D.	5	Diarrhea	2
E.	1	Meningitis	2
<hr/>			
	365	TOTAL	201



The crude infant mortality rate showed a decrease from 31.1 in 1973 to 39.0 in 1974. However, it should be noted that while Congenital Leblity and Prematurity are still the greatest causes of death under 1 year of age, the actual numbers have increased slightly

There was one maternal death out of 6,430 births, plus 84 still-births. Maternal mortality has decreased 80% since the Medical Society formed a Maternal Welfare Commission to cooperate in this work with us some thirty-five years ago.

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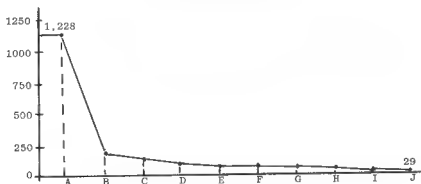
GENERAL MORTALITY

The crude General Mortality rate has decreased from 9.7 per m in 1974 based on an estimated population of 380,000 to 8.9 per m in 1975. However, Heart and Cancer still are our greatest killers and much work still has to be done in the field of Chronic Disease Control

HEART DISEASE

The major cause of Mortality is Organic Heart Disease, with 1,786 deaths in 1974, an increase of 33 as compared with 1,819 deaths in 1975.

TEN MAJOR CAUSES OF DEATH AMONG NEWARK RESIDENTS - 1975



- | | |
|--------------------------|--|
| A. Organic Heart Disease | F. Homicide |
| B. Cancer | G. Congenital Debility |
| C. Ill-Defined | H. Cirrhosis of the Liver |
| D. Apoplexy | I. Respiratory Disease (excluding pneumonia) |
| E. Accidental | J. Pulmonary Embolism and Infection |

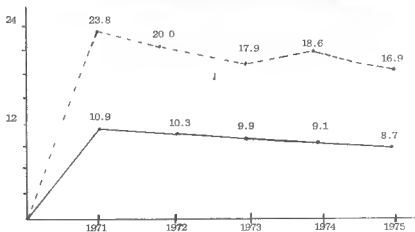
Total Deaths 2,246

TOTAL DEATHS IN NEWARK BY AGE GROUP

Year	Under 1 year	1-4	5-14	15-24	25-44	45-64	+ 65	Total
1971	365	40	36	145	482	1,269	1,847	4,184
1972	256	50	46	117	443	1,215	1,802	3,929
1973	312	39	43	114	396	1,164	1,934	4,002
1974	276	40	25	125	416	1,064	1,732	3,678
1975	201	40	37	106	361	1,027	1,606	3,378

Birth - Death Rate Comparison (1971-75)

(A) Adjusted death rate (B) Birth rate



* The above rates are based on a per 1,000 population figure

BUREAU OF PUBLIC HEALTH LABORATORIES

Frank J. Ciasulli

The Bureau of Public Health Laboratories renders laboratory services for the various Divisional preventive, diagnostic and therapeutic clinics, and provides laboratory support for several Federal and State funded community health programs which operate under the auspices of the Department of Health and Welfare.

1975

The activities of the Bureau of Public Health Laboratories in 1975 were consistent with the concept of delivering and developing comprehensive health services which would meet all the requirements of health for individuals in the Newark community, readily available and used by those who need them. This concept, in my opinion, is the correct goal for positive community health action. The means for achieving this goal are to a great extent in administration, rather than in medicine or science. To this end, the Bureau of Public Health Laboratories made substantial progress in 1975.

The major tasks before us in the coming years is to coordinate all community health resources, so that they operate as a unified system providing uninterrupted laboratory services for the community members and to develop in the community, knowledge and attitudes that will lead them to use the laboratory services.

The achievement of our goal and the accomplishment of the major tasks before us will be severely impacted upon and challenged by the 1976 economic conditions. Program budget reductions and massive lay-offs will certainly limit the Public Health Laboratories capabilities to deliver services. However, the Public Health Laboratories will attempt to meet the challenges and continue to improve the delivery of laboratory services to the Newark community.

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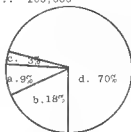
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ACTIVITY SUMMARY

TOTAL LABORATORY TESTS 100,060

- a. Chemistry Laboratory 8,732
- b. Pathology Laboratory 18,408
- c. Bacteriology Laboratory 3,258
- d. Serology Laboratory 69,662
(VDRL Tests)



Bureau Output, 1973 - 1975:

<u>YEAR</u>	<u>TOTAL TESTS</u>	<u>DIFFERENCE</u>
1973	107,570	+12%
1974	120,479	
1975	100,060	-17%

BUREAU OF NUTRITION SERVICES

Janice Rankins

The Bureau of Nutrition Services is committed to the planning, development and delivery of the most thorough and effective means of improving the nutritional status of Newark's residents via the provision of the following units of service: Programmatic Planning and Research, Consultative and Supportive Service and Nutrition Education Services.

1975

Nutrition Education

Between January and May, 1975 the Nutrition Bureau conducted 18 Nutrition Education sessions involving 1,258 people in Senior Citizens Centers, Health Clinics, Health Training Programs and other sites.

Additionally, the Nutrition Bureau participated in Radio and Television broadcasts that reached mass audiences estimated at more than 38 000 persons, the majority of which were Spanish speaking.

DIETARY COUNSELING

The Nutrition Bureau provided dietary counseling to patients at Diabetic Clinics, reaching 89 patients in 2 sessions. This service was also provided to many of the Senior Citizens who attended Nutrition Education Sessions.

NUTRITION SURVEY

The Nutrition Bureau conducted a nutritional survey which was designed to collect data about the food purchasing and eating habits of Newark residents in order to evaluate nutritional levels and determine how socio-economic factors influence these food patterns.

The Bureau received valuable assistance from 9 volunteer nutrition students provided by Montclair State College. Under the supervision of the Nutrition Bureau, more than 1,555 survey forms were distributed, of which approximately 325 were completed and returned. The staff and students compiled data, based on person-to-person interviews for 8 of the 11 statistical areas.

FOOD DAY

The Nutrition Bureau sponsored a 'Food Day' program at City Hall on April 17, 1975. In conjunction with this, a poster contest was conducted in Newark's Junior High Schools to involve students in designing posters using the theme "Back to Fruits and Vegetables". The purpose of the contest was to increase nutritional awareness in general, and to highlight a general deficiency in consumption of fruits and vegetables revealed through the nutritional survey, and to make the initial thrust toward incorporating nutrition education into the public school curriculum.

CONSULTATIVE SERVICES

The Nutrition Bureau provided counseling services to programs and agencies throughout Newark during 1975 that ultimately affected more than 100,000 people through such activities as menu planning, special diet counseling, nutritional evaluations, special training sessions for Health Aides and participation in conferences.

Before the end of the action year, the Bureau and its sister project, Nutrition Program for the Elderly, suffered staff losses, including the resignation of the Bureau Chief. This all but rendered the Bureau inoperable at the close of 1975. It is expected that this situation will be remedied early in 1976.

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ACTIVITY SUMMARY

<u>SERVICE</u>	<u># PERSONS SERVED</u>
1. Nutrition Education	81,258
a) Sessions	1 258
b) Radio & T.V.	30,000
c) Nutritional Services Publication	50,000
2. Dietary Counseling	239
a) Diabetic Clinic	89
b) Senior Citizens via NPE, RSVP, NOEA	150
3. Nutrition Survey	1,555
4. Food Day Activities	2,000
5. Consultant Services	100,000

BUREAU OF HEALTH EDUCATION AND COMMUNITY INFORMATION

Phil Howard

The Bureau of Health Education and Community Information is committed to the planning development and delivery of the most thorough and effective health education services to Newark residents. The provision of these services is accounted for under the following functions:

Program Planning and Delivery of Selective Health Services

The activities under this function include priority setting related to special health education and service projects. Need analysis of selected target groups, data and other resource gathering, and program logistics.

Community Information Services - The activities under this function relate to providing specific health education and informational messages to identified target audiences via structured mechanisms.

1975 During 1975, the Bureau of Health Education and Community Information continued to provide direct educational, informational and medical services for the Department of Health and Welfare to Newark residents. These services were for residents from pre-school children, adults over 35, and senior citizens. The Bureau attempted to raise the "health consciousness" of Newark residents by making available health services that were free and accessible.

Some of our major efforts were centered around sponsoring educational sessions and screening/medical programs in immunizations, hypertension, diabetes, glaucoma and cataract testing. The Bureau uses resources within the Department of Health and Welfare and the community in order to organize, coordinate and sponsor programs resulting in Newark residents being serviced during 1975. The Bureau recognizes the need to continue such efforts as it relates to improving public health status in Newark. Efforts during the year had to be curtailed, particularly in hypertension and immunizations, because of economic and manpower availability. Educational sessions at numerous community groups and agencies were sponsored on a myriad of health topics from allergies to venereal disease.

The Health Education Bureau often acted as the liason between programs and services sponsored by the Department of Health and Welfare, local leaders and community organizations. In this capacity the Bureau in some cases initiated and continued working relationships with such agencies as the New Jersey College of Medicine and Dentistry, the Newark Jaycees, the Urban Health Institute, N.A.A C.P., United Hospitals, the Newark Day Care Center, Golden Age Projects and the Essex County Pharmaceutical Society. These are only a few of the number of agencies with which we cooperated.

Several major accomplishments during the year were the Newark "Health Day" in which over 2,000 people participated, the Venereal Disease Exhibit at the Newark Museum, which over 7,000 people attended; the formation of the Health Education Ad Hoc Committee of concerned and interested individuals from community agencies involved with health education in Newark; and the Boricua Awareness Program during the latter part of 1975.

In our efforts to increase health awareness among Newark citizens, numerous publications in the form of posters, flyers and pamphlets were distributed on relevant health concerns such as immunizations, hypertension, diabetes and venereal disease. One newer pamphlet, developed and distributed by the Bureau, was on breast cancer. The purpose of this pamphlet is to inform adults in Newark, both male and female, as to the health problems of breast cancer and available services for care and treatment.

In providing its services, the Health Education Bureau reached out to both the parochial school and public schools in Newark. High school students from several schools in Newark participated in the Explorer's Career Program which orientated these students to careers in public health. This program was sponsored jointly by the Health Education Bureau and the Explorer's Division of the Boy Scouts of America.

Several participants from the parochial school administration met to discuss health activities in parochial schools. As a result of that meeting, efforts will be made to examine and develop a new and relevant curriculum for health education in these schools.

AUDIO VISUAL SERVICES

Wesley Jones

1975

The Audio-Visual section of the Health Division is also under the auspices of the Health Education Bureau. During 1975, the Audio-Visual section purchased a new printing press which should increase its output substantially. At present, the Audio-Visual section averages a monthly output of 26,000 impressions. This is 60% of the record and communication forms used by the Department of Health and Welfare and other municipal and federal programs.

BORICUA AWARENESS PROGRAM

Caridad LaBoy

1975

The Boricua Awareness Program, also under the auspices of the Health Education Bureau provides in-service training for the Division of Public Health Nurses. The program is directed toward the Public Health Nurses who are providers in a system which has a number of Hispanic consumers, most of whom are Puerto Rican. The nurses are being sensitized to those cultural dynamics which interfere with positive health behavior. In addition, the nurses are learning both verbal and written expressions which they can use in health care delivery.

Although the program presently deals with nurse providers and Puerto Rican patient/consumers, efforts will be made in the future to include other providers at the Department of Health and Welfare and to include other minority consumer groups.

ACTIVITY SUMMARY

Screening and Immunization Services:

	Program Type	Location	Total # Patient encounters	Positive Patient Encounters
1)	Diabetes Detection	City Hall, Health Fair Senior Citizen Cen.	1,534	157
2)	Hypertension Screening	New Pharmacies, housing projects, schools, and other community agencies	6,487	1,664
3)	Poison Prevention	Neighborhood Pharmacies	30 participating pharmacies	-
4)	Immunization	Day Care Centers	5 Centers	250 immunizations
5)	Glaucoma & Cataract Screening	Sen. Cit. Jamboree & Newark Health Day Fair	310	11

Other Significant Education and Information Services:

<u>Topics</u>	<u>Target Population</u>	<u>Program/Agency</u>
1) Maternal, Infant Care	Health Aides	Lead Poison & Rat & Pest
2) Alcoholism	Health Aides	Lead Poison & Rat & Pest
3) Breast screening	D.H.W. Staff	Department of Health & Welfare
4) Dental/Alcohol/Sickle Cell Anemia	General Community	West Side, Ironbound & North Ward Health Fairs

BUREAU OF SOCIAL SERVICES

Thomas P. English

The Bureau of Social Services addresses the problem of arranging for adequate social services for Newark's medically indigent who seek, or are referred to services available under the auspices of the Division of Public and Community Health Services. The services include, eligibility determination for divisional health services, prescription approvals for eligible patients who have received medical services from local health care providers, social service case management and appropriate agency referrals.

1975

The Social Service Field Worker followed up on referrals received from Public Health Nursing, local agencies, hospitals, clinics and private citizens. Clients had a wide range of medical, personal, economic and social problems. Many of these cases involved locating and motivating families with children who needed follow-up testing and treatment for lead poisoning. Other clients, with a complexity of problems, required referral to and cooperation with other professional and service agencies such as homemakers, food stamps, Public Welfare, County Welfare, Division of Youth and Family Services, United Hospitals Child Development Clinic and Division of Inspections.

The Dispensary caseworker screened prospective patients for financial eligibility for Dispensary services and was also responsible for approving the filling of outside prescriptions for medically indigent persons coming to the Dispensary Pharmacy. In addition, counseling and referral services were provided to patients.

BUREAU OF MEDICAL HEALTH SERVICES

Samuel Provenciano, M.D.

The Bureau of Medical Health Services is designed to deliver a combination of various preventive, diagnostic and therapeutic services to Newark's medically indigent and general assistance clients. The Bureau delivers services to approximately 10% (10,000) of the estimated 98,000 eligible population.

The general description of the various clinics and services which operate under the auspices of the Bureau are: Medical Clinic, Medical Evaluation Clinic, Diabetic Clinic, Eye Clinic, Allergy Clinic, Skin Clinic, Cancer Service Clinic, Podiatry Clinic, Domestic License Clinic and Immunization Clinic.

In addition, physician services are provided to support the efforts of the Bureau of Chest Disease Control and the Bureau of Venereal Disease Control. Two services which support the clinic operations and are also part of the Bureau's services are the City Dispensary Pharmacy and X-ray Units.

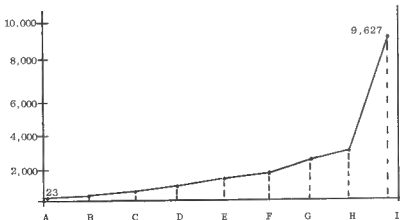
1975 In February 1975, an appointment system was implemented in the Therapeutic Clinics to provide a more systematic flow of patients to the clinics; thus improving service to patients by alleviating overcrowding. Also, afternoon sessions were started, in addition to the morning Medical Clinic sessions. In addition a new Child Health Conference was opened in March and in September the Supplemental Food Program W.I.C. was added to the services in the Child Health Conferences.

ACTIVITY SUMMARY

Total Visits 18,729

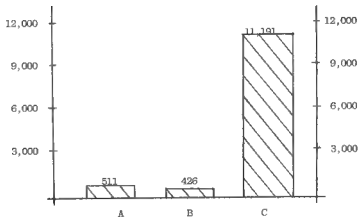
I. Cumulative Clinic Visit Profile:

- | | |
|------------------------------|----------------------|
| A. Pediatric | F. Eye |
| B. Injections | G. Metabolic/Medical |
| C. Chiropody | H. Skin |
| D. Allergy | I. Medical |
| E. Medical Evaluation Center | |



II. Other Clinics and Services

- A. Health Examinations
- B. Detection Clinics
- C. X-Rays



TOTAL PATIENTS SEEN AT BUREAU..... 4,450

BUREAU OF PUBLIC HEALTH NURSING
Petrina Livecchi R.N. M.S.

The Bureau provides generalized public health nursing services for the Division of Public and Community Health Services. These services are delivered via the following functions:

1. Bureau of Medical Health Services
2. District Nursing Services
 - (a) Parochial Schools
 - (b) Child Health Conferences
 - (c) Field Services
3. Collaboration with other Bureaus and Community Agencies

1975

The Therapeutic Clinic's revised appointment system matched with nurse health assessments in the admissions area, alleviated overcrowding in most clinics. Combined the improvements contributed to more efficient health services for patients.

This was the first full year of services provided by the integrated personnel of the Parochial School and District Nursing sections. Although we had a decrease in staff for this area, services were still maintained at a satisfactory level. In the Parochial Schools, health services were provided to students in 22 elementary schools and 3 high schools during the 1974-75 school year.

A significant first occurred in this area during 1975. A meeting with Parochial School administrators was held to discuss provision of school health services. Due to the favorable results, we plan to make this an annual event.

At the beginning of 1975, we were providing nursing services for 30 weekly Child Health Conference Sessions in 11 areas of the city. The weekly sessions were gradually decreased by the Bureau of Child Hygiene, and by the end of the year we were servicing 7 Child Health Conferences at 10 locations. The Supplemental Food Program - W I.C., was added to the services at 7 Child Health Conference locations.

Home visits increased in behalf of the Tuberculosis Control Program. On occasion, at the request of the Health Officer, home visits were made to assess environment and health needs of citizens.

Our services also included follow-up for the Lead Poison Control Project. In November, 1975 our participation in this program was markedly decreased due to the revision of the follow-up procedure. Subsequently all follow up is now initiated by Lead Project personnel and only the child needing nursing expertise is being referred to the Bureau of Public Health Nursing.

During the summer of 1975, in collaboration with the Bureau of Health Education and Community Information, a mobile Child Health Conference was offered to several Day Care Centers in an effort to provide needed immunization and other health services for parents who requested same. While this service was not fully utilized, it is hoped that parents of Day Care Center children will attend the regular Child Health Conferences as the need arises.

After several months of planning with the staff of the Bureau of Health Education and Community Information, the Boricua Awareness Program Course for public health nursing personnel commenced in November 1975. It is planned that by the end of June 1976, all of our personnel will have had 30 course hours.

Rutgers University uses our District Nursing services regularly as an observation laboratory for their basic nursing students and pediatric nurse practitioner students. Other local colleges and community agencies request these services on a sporadic basic.

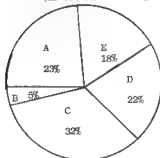
A plan with the Child Abuse Center of the New Jersey College of Medicine and Dentistry has been formalized with us to participate in their intensive program for detection treatment and follow-up of abused children.

By the end of the year, Bureau staff on all levels had the opportunity to constructively analyze the services currently provided; and help formulate plans for future services in the nearly complete revision of the Nursing Service Manual, the complete revision of the Parochial School Manual and school report forms, and the initial revisions on the Field Services and Child Health Conference Manuals; the latter to be completed in 1976.

ACTIVITY SUMMARY

Visit Profile:

Classification of Visits



A. New Case - 1st Visit . . . 5,193
 B. Current Year - 1st Visit... 1,016
 C. Re-Visits..... 7,069
 D. Not At Home..... 4,975
 E. Terminations..... 3,914

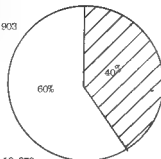
Total Visits..... 22,167

Personnel Utilization

☐ Nurse Visits7,903

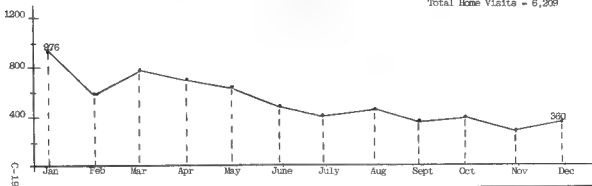
☒ Health Aide
 Visits.....5,375

Total Completed Visits13,278



ACCUMULATIVE HOME VISITS

Total Home Visits - 6,209



D I V I S I O N O F P U B L I C A N D C O M M U N I T Y H E A L T H S E R V I C E S

REFERRALS 1975

REFERRALS	HOSP.	AGENCY HEALTH CENTERS	DIV. OF HEALTH	DIV. OF INSPECT.	STATE HEALTH DEPT.	OTHER	TOTAL
TO DISTRICT NURSING SERV. FROM...	620	2	25	10		3	660
BY DISTRICT NURSING SERV. TO.....		4	270	72	1	2	349
TOTAL	620	6	295	82	1	5	1,009

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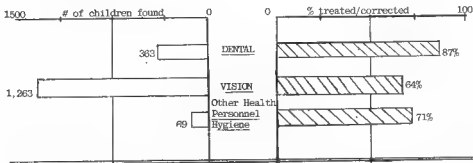
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SERVICES TO PAROCHIAL SCHOOLS 1974-1975:

Type of Services	1973-74	1974-75	Difference
1) Physical Examinations by School Physicians	1,984	3,925	+ 98%
2) Immunizations	812	914	+ 12%
- D T			
- T O P V			
- Measles			
- Rubella			
- Flu Shots			
3) Tuberculin Screening	2,186	3,709	+ 70%
4) Vision Screening	8,711	8,711	- 7%
5) Audio Screening	4,778	4,109	+ 14%
6) Other (Health Appraisals, School Exclusions, First Aid, Conferences & Instruction)	29,300	20,784	+29%

Major Defects in School Children



BUREAU OF CHILD HYGIENE
William J. Spinosa, M.D.

The prime purpose of the Bureau of Child Hygiene is the supervision of infants and children from birth to six years of age, and retarded children to age thirteen. The Bureau strives to provide each child with the opportunity for optimal physical, intellectual and emotional growth and development through the application of preventive pediatrics. Well Baby-Child Health Conferences are held at various locations throughout the City, staffed by physicians, pediatric nurse practitioners and nurses. Child Health Conference sessions are planned at regular intervals in accordance with the age, health conditions and needs of the child, with the purpose of providing continuous health supervision of these children who are unable to get such services elsewhere.

1975

Attendance at the Child Health Conference locations decreased in 1975 and the objective to achieve a 10% increase in attendance over 1974's figures was not accomplished. Two other objectives, the establishment of Sick Baby and Children Clinics, and the relocation of at least 2 Child Health Conferences had to be shelved because of the curtailment of funds during the budgetary crisis in 1975, forcing a reduction of our physician staff and Child Health Conference locations and sessions. The Bureau of Child Hygiene ended the year with ten Child Health Conferences strategically located throughout the City, and sessions reduced to seventeen a week. The Supplemental Food Program for Women, Infants and Children though, was expanded for inclusion in seven of the ten locations.

ACTIVITY SUMMARY

<u>TYPE OF SERVICE</u>	<u># OF EVENTS</u>
1. <u>DPT injections:</u>	<u>3,838</u>
- first	
- second	
- third	
- DT booster	
- Pediatric DT	
2. <u>Oral Polio Trivalent</u>	<u>3,906</u>
- first dose	
- second dose	
- third dose	
3. <u>Vaccinations:</u>	<u>1,769</u>
- measles	
- smallpox	
- rubella	
- mumps	

BUREAU OF CHILD HYGIENE - 1975 SERVICE PROFILE

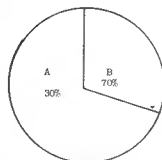
Patient Visit Breakdown



A - New Cases	2,487
B - First Visit this year by old case	2,343
C - Revisits	6,721

Total	11,551
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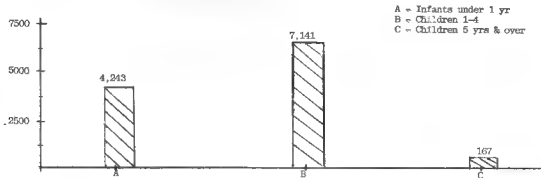
Visits By Encounter



A - Complete physical examination	8,115
B - Other Medical Services	3,436

Total	11,551
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ATTENDANCE BY AGE GROUP



A - Infants under 1 yr
 B - Children 1-4
 C - Children 5 yrs & over

Type of Services, Cont'd.

of Events

5. Tests:

3,307

- tuberculin
- PKN

6. Screening:

109

- Vision
- Hearing

BUREAU OF DENTAL HEALTH SERVICES

Alan Gale, D.D.S.

The Bureau provides professional and supportive dental services (Emergency, Preventive, Restorative and Dental Health Education) to Newark's approximate 98,000 eligible population. The highest priority addressed is in the reduction of dental caries.

1975

The year 1975 was not a good year for the people receiving dental treatment in our health centers. The impact of the economy was severely felt as the dental department lost 50% of its personnel. With only half the number of doctors on staff, and not having enough doctors when the staff was full, the situation was impossible. Not all eligibles who requested treatment were able to receive it. Five satellite clinics were closed and the two remaining satellites were operational 9 hours per week instead of the previous 30 hours per week.

A study of the statistics from 1974 and 1975 shows that although there was an increase in the number of patients seen, and an increase in the number of visits per patient, the number of treatments delivered was, of course, severely reduced. This shows that we were unable to deliver the services required, as any increase in the number of patients and number of visits should, out of necessity, be reflected in an increase in the number of treatments.

The closing of the satellite clinics also meant that children, who were the only patients treated at the satellite clinics, were no longer the prime target of our services. Now they are on equal terms with adults and this is seen in the figures showing that children treated for the year showed a huge decline, while adult treatments increased.

Now that Medicaid services for dental patients over the age of 21 have been eliminated in the State of New Jersey the patient load is on the upswing. The dental department can only hope that some, if not all, of the reductions made in 1975 will be restored in 1976 and the needed dental services can then be delivered to the eligible patients. Until this becomes a reality, our priorities will have to be changed. Patients with emergencies will always be seen. With fewer dentists, emergency treatment will occupy a greater percentage of their time leaving less time for restorative and preventive services.

One major objective was reached and is deserving of special mention. Modern equipment was obtained for the complete facility at 94 William Street.

<u>ACTIVITY SUMMARY</u>			
	<u>1975</u>	<u>1974</u>	<u>DIFF.</u>
TOTAL TREATMENTS.....	18,638	23,870	-22%
Children Treatments.....	10,476	17,071	-39%
Children Visits.....	9,543	7,013	+36%
Patient Visits.....	1,899	1,584	+20%
Adult Visits.....	4,357	3,753	+16%
TOTAL X-RAYS.....	6,281	5,726	+10%

BUREAU OF CHEST DISEASE CONTROL

Dave Whipple

Bureau of Chest Disease Control services are available to all Newark residents. In its efforts to reduce the incidence of chest diseases, the Bureau;

- provides medical and epidemiologic services designed for the prevention of chest diseases,
- coordinates the administrative activities of the Bureau of Chest Disease Control,
- provides liaison services to satellite hospital chest clinics,
- provides program planning and evaluation of the Tuberculosis Control Program.

1975

Calendar year 1975 was a pivotal year for tuberculosis control in Newark. Turning points in tuberculosis programming and control were the closing of New Jersey Hospital for Chest Diseases; the opening of Martland Medical Center's Comprehensive Pulmonary Disease Clinic, and the purging of case records so as to conform follow-up activities to the current national program standards.

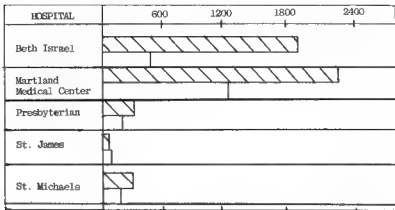
Newark tuberculosis patients needing hospitalization can now be referred to any general hospital that will accept them. Those persons living in Newark without third party coverage can be hospitalized in Martland Medical Center or in St. Michael's Medical Center.

Outpatient care for tuberculosis took a new turn with the opening of the Comprehensive Pulmonary Clinics at Martland. Patients needing outpatient care for pulmonary problems secondary to their tuberculosis can now have such problems attended to. In addition, because

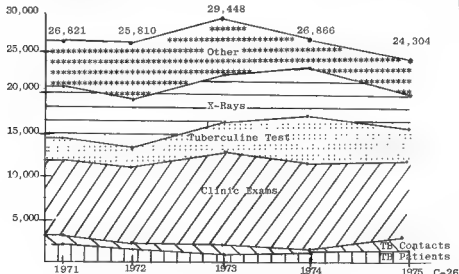
ACTIVITY SUMMARY

SATELLITE CLINIC ATTENDANCE:

Patients Contacted 4,846
 Total Visits .. 2,076



CLINIC ACTIVITY:



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of location and staff, patients hospitalized at Martland have continuity of care from inpatient to outpatient. The Comprehensive Pulmonary Clinic has been increasing its tuberculosis patient load and has become an important source for tuberculosis outpatient care in Newark. The principle facility still remains, however, the William Street Clinic.

Administrative review of case records in 1975 was a priority activity. The intensive review of patient's treatment and biologic status was done using the current national guidelines for patient surveillance and treatment. Public Health follow-up was determined to be no longer necessary for a vast number of cases on file. Their records were purged from the files and the total Newark tuberculosis case load subsequently reduced to a more manageable size. Moreover, follow-up and patient surveillance, according to recent national standards, was made possible through this review of patient records.

As for specific program objectives for 1975, a review of the bacteriologic conversion of sputum for reported cases show that 68% of reported cases with positive culture (infectious cases) have a negative sputum within three months, and that by the end of six months 94% have been confirmed to have converted to negative sputum. A review for patients reported in 1974 was recently made and for that cohort of patients, 72% had completed the first 12 months of drug therapy.

Finally, there was established in 1975, the Newark Tuberculosis Coordinating Committee. This committee began to review, outline and formulate tuberculosis program priorities for Newark, unify diagnostic and treatment standards, and established administratively one tuberculosis program for Newark. Unfortunately, this committee all but dissolved by the end of 1975, leaving incomplete the finalizing of a final report and plan.

BUREAU OF COMMUNICABLE DISEASE CONTROL
Alfred Giordano

The Bureau of Communicable Disease Control addresses itself to the many problems that infectious and other diseases cause; thereby affecting the health and well-being of the population of the city of Newark and its surrounding areas. The major thrust of this bureau is to prevent communicable and other reportable diseases from occurring and controlling them when they do occur. The functional areas of service are, Epidemiologic Services, Sample Collection Services, Central Communicable Disease Registry Maintenance and General Services.

1975

The year 1975 has been noted by a major development in public health. This development was the implementation by the New Jersey State Health Department of regulations which are now known as Chapter 14, Immunization of Pupils into the New Jersey State Sanitary Code, effective 9/1/75.

The regulations contained in this chapter shall apply to all pupils (except those under 1 year of age) attending any public or private school in New Jersey, including child care centers, nursery schools and kindergartens. No principal or other person in charge of a school shall knowingly admit or retain any pupil who has not submitted acceptable evidence of immunization according to the schedule set forth in this chapter.

Prior to this year municipalities or school districts throughout the state had set their own immunization requirements, if any at all. This resulted in a lack of uniform protection against Polio, Diphtheria, Tetanus, Whooping Cough, Measles and Rubella.

The Newark Health Department in conjunction with the Newark Board of Education had established over twenty years ago, basically the same requirements contained in Chapter 14 of the New Jersey State Sanitary Code. The application and enforcement of these requirements in recent years left a lot to be desired. Many children who received their initial immunizations at the Newark Health Department or at Newark Child Health Conferences were admitted into school and immunizations were never completed. This condition caused the immunity level of Newark school children against the above named diseases to fall to a dangerously low level.

Although Chapter 14 of the New Jersey State Sanitary Code has only been in effect for several months, this Bureau, working in a close cooperation with the nurses of the Newark Public School system and others have made great strides in seeing that these regulations are complied with.

Two noteworthy cases in the control of communicable disease occurred in the year of 1975. The first was the tracking down by Bureau Inspectors of a confirmed Leprosy case. This case was reported to us by the New Jersey State Health Department as having left the city of Miami Beach, Florida to take up residence in Newark. Once located and identified, arrangements were made by this Bureau to have the patient and all family members examined at the United States Public Health Hospital, Staten Island, New York. The patient and family were examined by physicians with particular expertise in this disease and were placed on therapeutic drug regimen. At present, the patient and family are being kept under surveillance by this Bureau.

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The second interesting occurrence this year, was the reporting of five positive cases of Malaria in the City of Newark. This the highest number of Malaria cases reported in Newark since 1964. It is to be noted that all five cases occurred in persons that migrated to the United States within the last several years and came from countries where Malaria is endemic. Fortunately for us, this disease is not spread man to man (except through blood transfusions, contaminated syringes, etc) and the intermediate host that spread the disease, a certain species of Anopheles mosquito, is not found in this area.

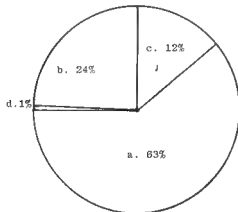
Although the objectives set forth for this Bureau in 1975 were not accomplished in total, we feel gratified as to the objectives that were met. Of the seven objectives set forth five were met and two were not. The reasons for not meeting these two objectives were due to factors beyond our control such as the reduction of both field and clerical personnel and the inability of the administration to hire additional qualified Sanitary Inspectors due to budgetary problems.

ACTIVITY SUMMARY

TOTAL ACTIVITIES 15,406

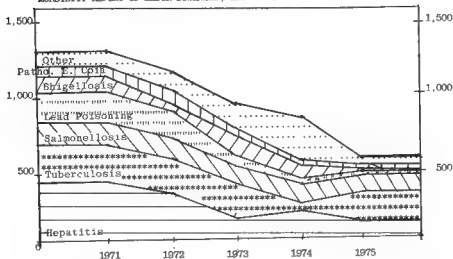
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|---------------------------|-------|----------------------|-------|
| a. Completed Visits | 9,646 | b. Investigations.. | 3,720 |
| - Collecting Specimens | | - Animal Bites | |
| - Delivering Specimens | | - General Complaints | |
| - Home Immunizations | | | |
| - Culture Stations | | | |

- | | | | |
|---------------------------------|-------|---------------------|-----|
| c. Inspections/Re-Inspections.. | 1,794 | d. Other Activities | 246 |
|---------------------------------|-------|---------------------|-----|



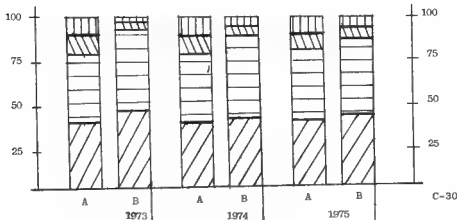
- Court Cases
- Special Assignments
- Refused Entry/ Wrong Address

MORBIDITY REPORT OF MAJOR DISEASES, 1971 - 1975



IMMUNIZATIONS:  Polio  Rubella
 Diphtheria,  Measles
Percent %  Pertussis,  Tetanus

Percent %



A. Division of Public and Community Health Services Clinics
B. Private Physicians * Includes Other Health Clinics

BUREAU OF VENEREAL DISEASE CONTROL
Nicholas DelDeo, M D.
Clifford Freund

The Bureau of Venereal Disease Control is a preventive disease control program mandated by the state statute and local ordinance 2.10 4 (F). All Bureau activities are related to the prevention, identification and treatment of venereal disease serologic reactors, culture-positive individuals, infectious patients and/or sexual contact of infectious patients. The bureau's services are available to all Newark residents. Functionally, the bureau provides the following Medical Clinic Services, Epidemiologic Services (Client Interviews, Contact Investigations, Suspect and Associate Investigation and follow-up Investigations).

We are happy to report that once again this year the number of reported early syphilis cases has decreased significantly, compared to last year. In calendar year 1975, the City of Newark reported 248 Primary and Secondary cases of syphilis which represents a 19% reduction over the 1974 total of 306. We are encouraged to see an increase in the number of patient visits and treatments given, while the number of reported cases decreased. This reflects the epidemiologic effort made by the Newark Venereal Disease staff in referring the contacts and suspects of infected patients to our clinic for medical services. These efforts, we believe, are largely responsible for the reduction of early syphilis morbidity in our city.

When we review our gonorrhea epidemiologic program, we also can report increases in services delivered to the citizens of Newark. Unlike syphilis, the gonorrhea rate is high and has remained at a high level. With some administrative changes and additional personnel we have been able to increase our epidemiologic activity dramatically in the past year. As a result of this activity, 754 (321 in 1974) patients were brought to treatment for gonorrhea and another 344 (253 in 1974) patients were treated prophylactically, thus preventing further spread of this disease.

One of our greatest concerns is our clinic image within the community. We have planned certain physical changes to insure greater patient privacy, easier patient flow and more efficient record systems. In addition, we are now treating other sexually transmitted diseases besides gonorrhea and syphilis. These diseases include Trichomonas, Moniliasis and Venereal Warts. We believe the treatment of these other diseases also contributes to the increased attendance at our clinic. With the retirement of our Medical Director, our Bureau faces a critical shortage of physician time. We hope this problem will be solved in the near future so that we can provide quality medical care and service to the residents of Newark.

ACTIVITY SUMMARY

CLINIC REPORT - 1973-1975.

I. <u>Syphilis Reported.</u>	1973	1974	1975
Blood Tests	10,486	9,736	11,163
Dark Fields	253	253	150
Total New Patients	390	418	398
Total Patient Visits	2,830	2,588	2,944
Treatments Conducted	2,318	2,322	2,467

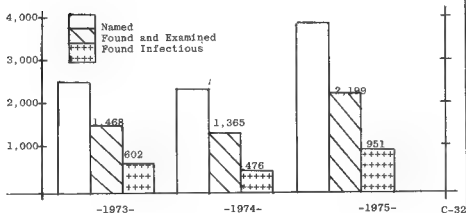
Stages

Primary and Secondary	382	200	147
Early Latent	207	150	142

II. Gonorrhea

New Patients Seen	4,791	5,120	7,677
Total Cases Reported	4,791	5,103	4,204

SEXUAL CONTACTS



COMMUNITY HEALTH SERVICES
Bernita Stanley

Develops and attempts to improve the personal health care delivery system for Newark residents by maximizing availability, continuity and comprehensive quality health care services. It organizes core staff, to effectively administer and coordinate the Department's activities and responsibilities in the area of Community Health Services.

1975

The most concentrated efforts of the program were directed toward activities to complete construction and renovation of facilities to house two new neighborhood health centers. Although those efforts were not wholly successful, 1975 did result in the completion of 80% of the jobs for the Dayton Community Health Center (formally called Kretschmer site) and 70% of the jobs for the North Ward Community Center (formally called the American Legion site). Staff also worked in developing active and regular participation in indigenous community members on interim advisory boards of each site. Basic problems thwarting the completion of all jobs at the health centers were related to construction contractors inability to maintain a timely schedule, and changes in State regulations necessitating a revision in original plan drawings to accommodate unforeseen conditions in the renovation project.

Department-wide, Health Facility Planning conducted planning for the installation of a microfilming and storage area, improved space utilization for Food and Drug and Code Enforcement, relocation of the Audio-Visual Bureau to 2 Cedar Street and the physical lay-out of the multi-purpose center being developed at South 11th Street.

In the area of continuing support for community based programs, Community Health Services was successful in securing and administering over 1.35 million dollars for general, ambulatory health services and special health concerns such as venereal disease, geriatric health care and hypertension. Objective completion was 67.5% or attainment of 1.35 out of projected 2.0 million in funds.

Design and administration of two studies was completed. The two study areas were of Newark dental practitioners and neighborhood health center services. Loss of a key research staff member was a set-back, none-the-less, 75% of the work was completed. Final analysis and publication represent the remaining work to be done.

Nineteen seventy-five was a year of increased demand for technical assistance and requests for site visits and planning advice in the City's eleven communities. The technical assistance link to the Newark Comprehensive Health Services Plan (NCHSP) was continued but decreased in late summer as NCHSP acquired a full time staff. Not accomplished was the objective of conducting a base-line population study for NCHSP. Throughout the last half of 1975, NCHSP experienced other concerns which continued to take precedence over developing the base-line study. It is projected that 1976 will yield a workable arrangement between the City and NCHSP to accomplish that task.

EMERGENCY MEDICAL TRANSPORTATION SERVICE
James Eddleton

This project was developed to insure the provision of an emergency transportation service to all areas of the City. A service that promises to have a greater impact on the reduction of mortality, disability and response time, so that every resident requiring help can be reached in at least three minutes.

1975

A review of EMTS throughout the first nine months of 1975 reveals various fiscal and operational crises affecting the productivity and credibility of the project. Difficulties in payment of bills, availability of ambulances, lack of automotive parts and a general overload of duties as related to the "Emergency, Non-Emergency issue", have all resulted in a gradual deterioration of services since the EMTS Project established its individual transportation system in conjunction with the Martland Hospital Unit back in October, 1974. Specifically, according to the latest statistics, EMTS has been forced to reduce its number of total responses by an average of 26% every quarter throughout the 12 month period. In the same vein, its quarterly rate of patients transported has been decreased by an average of 9.5% or 357 persons during the last nine months (April-December). Although the effectiveness of the project was seriously hampered by many of these problems throughout the year, the project achieved and was able to maintain a response time average of 5.4 minutes

Before the close of 1975, EMTS merged with remaining activities of the Non-Emergency Transportation Service project into their program.

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NON-EMERGENCY TRANSPORTATION SERVICE

James Eddleton

The project is responsible for the development, integration and coordination of new or existing transportation services within operating agencies, to serve the Newark population by increasing the accessibility of essential social development resources to those who cannot reach medical and social facilities by public transportation because of age, disability or economic conditions.

1975

N.E.T.S. succeeded in providing transportation services to 15,758 Newark residents. The serviced population consisted of 5,334 handicapped (32%), 3,399 medically indigent (22%), 6,626 elderly (42%) and 399 patients with pre-school children (2%). Inclusive of all groups, the system anticipated on transporting 17,326 clients, but only achieved 91% of actual transports. Individual group analysis shows that the handicapped (92%) and elderly groups (92%) maintained the highest achievement level, followed by parents with pre-school children (90%) and medically indigent (87%). According to Health Districts, we find that 209 cancellations emanated from Health District I, 307 from Health District II, 386 from Health District III and 120 from Health District IV. Other indices responsible for cancellations were institutions 398 cancellations, individuals 1,020 cancellations and N.E.T.S. 150 cancellations.

Focusing on demographic statistics we discover that 5,629 males and 10,129 females benefited from N.E.T.S. services. Racial composition consisted of 7,556 Blacks (48%), 6,074 Whites (39%) and 2,128 Hispanics (13%). Health Districts profile reflects that 3,365 transports initiated from I; 5,201 from II; 4,383 from III and 2,809 from IV.

It was planned that as of October 31, 1975 N.E.T.S. would no longer extend transportation services to Newark residents. However, N.E.T.S. is still providing limited services, accommodated by three C.E.T.A. drivers now under the auspices of Emergency Medical Transportation System. To date no final decisions have been made to determine whether or not N.E.T.S. will operate again on a full scale basis.

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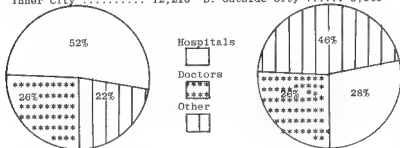
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ACTIVITY SUMMARY

TOTAL TRANSPORTS 15,758

A. Inner City 12,218 B. Outside City 3,540



SUMMER NUTRITION PROGRAM (SUNup)

Lucille Oliver

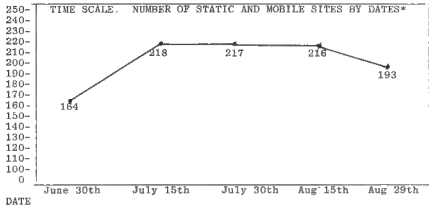
SUNup, operating during the summer hiatus, is committed to providing Newark's children with one-third of their required dietary allowance. A vital component of the program is the nutritional education function which attempts to impact on the nutritional values of the child.

- 1975 During the life of SUNup this year, three of the four stated objectives were accomplished:
- To provide a more palatable menu
 - To provide more jobs for the summer unemployed
 - To provide a nutritional education program that would extend beyond the summer and into the homes.

Over the summer, SUNup served over 300 sites in the distribution of lunches. The objective not fully accomplished was to serve an average of 50,000 meals each day of operation. The funding situation impacted on the completion of this objective. However, new legislation will enable the program to have funds available early enough in the 1976 calendar year that will hopefully eliminate some of the problems encountered in 1975.

ACTIVITY SUMMARY

Meals Served 436,895



* Sites were counted only if they were operating on one of the five dates listed above.

TREATMENT ALTERNATIVES TO STREET CRIME
Frank Hertz

TASC was created by the Special Action Office for Drug Abuse Prevention (SAODAP) and the Law Enforcement Assistance Administration (LEAA) to divert selected drug addicted arrestees from the criminal justice system into drug treatment and rehabilitation programs. The TASC Program in Newark is a Pre-Trial Intervention and Post-Trial Diversion Program.

1975

During the year, 444 drug arrested addict TASC clients, were referred into 19 drug treatment programs - Addiction Services, CURA/Residential Program, CURA/Outpatient Program, DANA Clinic, East Orange Drug Program, Hoboken Outreach Program, House of Insight, Integrity House/Residential Program, Integrity House/Outpatient Program, Mt. Carmel Guild, NARCO/Residential Program, New Well, Quinn Narcotics Program, Odyssey House/ Residential Program, Patrick House/Residential Program, Renaissance/Residential, Soul-O-House, Veteran's Administration NMTP, Bricktown Drug Program and Project Return/ Residential Program.

This incredible success rate, (88%) of referrals (444 out of 500 clients) by TASC into drug treatment programs, place the Newark TASC Program among the top five TASC Programs in the country.

TASC has not only succeeded in identifying, screening, referring and interrupting the vicious drug cycle of street crime, but has also substantially decreased the attendant cost to the community, of crimes committed by addicts. Sixty-two percent of all clients referred into treatment never received any treatment for their addiction until they entered the TASC Program. Moreover, the referral of 444 clients into treatment interrupted the drug cycle of street crime in such ways as to save the community millions of dollars. Since the average TASC client has a \$75.00 a day habit, it cost each addict approximately \$27,000 a year to support his habit.

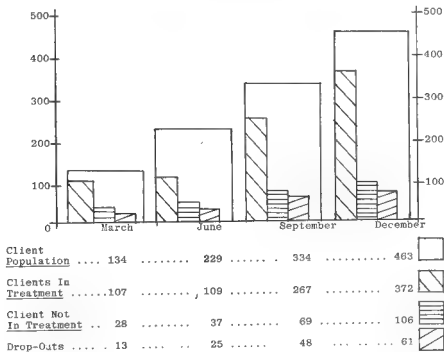
TASC has provided 100% of its clients with diagnostic work-ups and the opportunity to be referred into a treatment modality and drug programs, as well as providing medical work-ups for 90% of its participants.

Although court records do not establish how many clients were screened and interviewed by the Municipal Court Pre-Trial Management Division, a survey conducted by TASC personnel found that 90 defendants a month were screened and interviewed who admitted to being drug abusers. Thus, TASC has interviewed 1,080 clients during the year.

In the area of manpower, it was estimated that TASC would refer 226 clients into vocational rehabilitation counseling, job training, and employment during the course of the year. This objective was not met because clients were not designated by Treatment Programs as being job ready and able to apply themselves to job training programs, vocational rehabilitation counseling, transitional employment, and career employment. As a result, the vocational rehabilitation counseling unit, WORC (Work Oriented Rehabilitation Community) which is the last phase of treatment and rehabilitation, did not become operational until December, 1975.

ACTIVITY SUMMARY

ACCUMULATIVE QUARTERLY SERVICE PERFORMANCE PROFILE



PROFILE OF THE AVERAGE TASC CLIENT AS OF DECEMBER 31, 1975

Black, Male
Single, 29 years old

- Has been a drug abuser approximately 8.5 years
- Charged with alleged narcotic violations
- Has had prior arrests
- Unemployed at time of arrest
- Has received no prior treatment
- Referred to a drug-free treatment program

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W.I.C. SUPPLEMENTAL FOOD PROGRAM

Judy Wilson

The primary goal of the Newark Women, Infants and Children Supplemental Food Program was to reduce the incidence of nutrition related disorders, such as anemia, growth retardation, prematurity, malnutrition and child morbidity by providing supplemental foods of high nutritional value and through nutrition education.

Specific program objectives were the following: to provide food supplements to 7,000 eligible Newark residents monthly; to expand enrollment centers to five new sites, to provide nutrition education information to a minimum of 2,000 families and to decrease the program "no show" rate by 207

1975

In 1975 the W.I.C. Supplemental Food Program experienced a steady increase in enrollment and participation. The improved rates were the direct results of intensive community outreach programs, designed to inform Newark residents of program benefits and objectives, and in an improved voucher delivery system. Increased participation was greatly facilitated through the introduction of the voucher mailing system. The mailing system, implemented in July, offered the following advantages over the old voucher system: it eliminated the need for participants to report at the health centers solely for the purpose of W.I.C. vouchers, it decreased large patient crowds at the health centers, it reduced the overall waiting time at the health centers, thereby allowing more new patients to be enrolled, and it reduced the hardships on working parents who had to request time off from work to report to the centers for their vouchers.

In June 1975, the nationwide medical evaluations conducted by the Department of Nutrition, University of North Carolina, was concluded. The Newark W.I.C. Program was one of 20 W.I.C. Program sites selected to participate in the medical evaluation. The overall results of the national evaluation affirmed the positive benefits of the special supplemental foods upon program participants.

In October 1975, new legislation passed by Congress extended the program through 1977, and the Newark W.I.C. Program was refunded through June of 1976 for a case load of 9,000 participants, an increase of 2,000.

In meeting objectives set for 1975, the program had moderate success. The average number of participants served per month was 6,557. This was 94% of the 7,000 program slots.

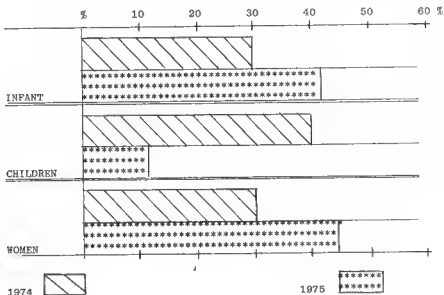
Information concerning nutrient requirements, designed to favorably influence meal planning and preparation, was provided through individual nutrition education sessions with the nutritionists at the sites. Materials provided included 15,000 W.I.C. information pamphlets, 5,000 recipes of the month, 30,000 W.I.C. information flyers and over 3,000 additional pamphlets and other literature developed by the W.I.C. staff.

The voucher mailing system has decreased the 'no show' rate considerably. An examination of the last 5 months of 1974 and the last 5 months of 1975 reveals that the 'no show' rate has been reduced by 66% .

The outreach program was also instrumental in improving participation. The program was publicized through contacts made with community and social agencies, tenant and PTA organizations, church groups, and door to door canvassing.

ACTIVITY SUMMARY

I "no show" Rate Comparison - Last 5 Months of 1974 vs 1975



"no shows"3,125

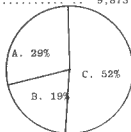
"No Shows"1,109

(35% Decrease in the "No Show" Rate)

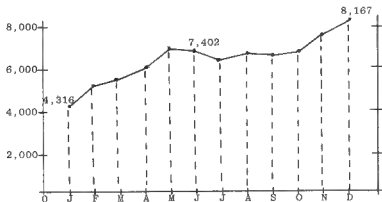
II. TOTAL CUMULATIVE PARTICIPATION78,684

III. TOTAL ENROLLMENT ... 9,873

A Infants 2,905
B. Children 5,109
C. Women 1,859



MONTHLY PARTICIPATION



DIVISION OF INSPECTIONS

Mr. Armand E. Lembo
DIRECTOR

DIVISION OF INSPECTIONS

Armand E. Lembo

The Division is responsible for the administration and coordination of the activities for 8 bureaus and 2 Federal/State Grant Projects. The major tasks are to.

- Consolidate and coordinate all regulatory inspection activities.
- Conduct all inspections mandated by general law and ordinance.
- Issue the required licenses and permits
- Prepare all legal documentation, hearings, surveys, and other field reports in the determination of the demolition of abandoned and hazardous structures in the city

1975

During the year the Division improved operations through the development of individual bureau tickler filing systems (a procedure for providing technical assistance to property owners in the improvement of their property) and a housing enforcement master file control card on each building in the city. A detailed housing analysis was completed that locates, identifies and schedules inspections in those areas of the city having priority need for building, plumbing and electrical enforcement. The Division also established a schedule for the immediate action on all complaints to secure a reasonable compliance with the adopted Building, Electrical and Plumbing codes. This is a complement to the systematic compliance program within the Division. During 1975, the average daily inspections were increased to 10 inspections per man per day.

INSPECTIONS SUMMARY

A. . Total Inspections (Initial, Re-inspection).....	263,339
1. Code Enforcement.....	134,816
2. Buildings.....	30,450
3. Electrical.....	22,632
4. Plumbing.....	26,600
5. Industrial Hygiene and Air Pollution.....	27,049
6. Childhood Lead Poisoning Control.....	6,322
7. Urban Rodent and Insect Control.....	2,492
8. Food, Drug and Meat Control.....	8,570
9. Weights and Measures.....	4,408

INSPECTIONS

	<u>Year</u>	<u>Monthly</u>	<u>Weekly</u>	<u>Daily</u>
B. Division:	263,339.....	21,945.....	5,486.....	1,097
C. Bureau Average	29,260.....	2,438.....	609.5.....	122

LEGAL ACTION SUMMARY

A. Cases Recommended for Court Action.....	5,315
1. Code Enforcement.....	4,299
2. Electrical.....	164
3. Plumbing.....	218
4. Industrial Hygiene/Air Pollution.....	130
5. Childhood Lead Poisoning.....	319
6. Urban Rodent & Insect Control.....	72
7. Food, Drug and Meat Control.....	113
B. Total number receiving fines.....	581
C. Total of fines levied.....	\$31,676.00

COMPLAINTS PROCESSING OFFICER

Milton Goodman

The Complaints Processing Officer receives and processes legal requests for action. He also prepares and draws legal complaints which are filed in Municipal Court. Summonses are served on alleged violators (defendants); return dates in court are set and all concerned personnel (line staff, etc.) are notified. He provides assistance to the Law Department in trying cases and holds hearings on all requests for extension of notice time.

ACTIVITY SUMMARY (1975)

A Supplemental Total Recapitulation, January - December, 1975

<u>Hearings</u>	<u>Complaints Processed in Court</u>	<u>Adjournments*</u>
809	8,914	6,160
<u>Summonses Issued</u>	<u>Including No Services</u>	
2,688	*2,495	

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B. Total Recapitulation, January - December, 1975

<u>Guilty</u>	<u>Cases</u>	<u>Dismissed</u>	<u>Withdrawals</u>
<u>Suspended Sentences</u>	1,172	913	90
174			
<u>New Cases</u>	<u>Bench Warrants</u>	<u>Fines</u>	
2,885	385	\$61,113.00	

BUREAU OF CODE ENFORCEMENT

Joseph D. McGinley

The Bureau deals with the enforcement of State Laws and Local Ordinances related to housing. It is responsible for assuring compliance with laws and regulations pertaining to the health, safety, maintenance, use and occupancy of public and private dwellings and vacant lots. These functions are carried out by means of inspections, administrative hearings and Municipal Court proceedings.

1975

The Bureau of Code Enforcement Program, during 1975, centered on a complete change of policy and methods. The biggest change being the Bureau's administrative responsibility for the majority of the bureaus and the two Federal/State Grant Projects in the Division of Inspections. Another change was in the area of locating proper ownership records. This was formerly the responsibility of each inspector. Now this search operations is handled by one person, thereby greatly freeing inspectors time. Also new to the Bureau was the creation of a functioning Complaints Unit, staffed by (1) Assistant Chief Inspector, (2) Inspectors and (1) Clerk.

There were some problems that hindered the Bureau's progress during the year, but even with the lack of trained personnel (50 trainees), lack of funds for relocations, and lack of an emergency repair ordinance, we were able to achieve 80% of our stated objectives. One objective, to inspect 2,350 multiple dwellings for the year, proved to be unrealistic insofar as only 450 multiple dwellings were cited for inspection. However, all that applied were inspected. The Bureau did surpass its relocation assistance number during the year. Assistance was projected for 200 families; 290 families were identified and provided with relocation during the year. Although faced with the coldest winter in 8 years and the above-stated problems, the Bureau completed its action year with statistics that surpassed previous years.

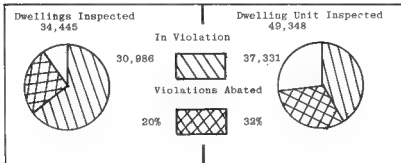
ACTIVITY SUMMARY

Total Inspections... .134,916
(Dwellings, Dwelling Units, Rooming Houses, Rooming House Units,
and Real Estate)

Total Violations..... 69,406

Written Notices to Owners13,385

Written Notices to Tenants..... 520



BUREAU OF BUILDINGS
Anthony DeCastro

1975

The Director's Office, in coordination with the Demolition Expeditor, completed the demolition of 192 buildings through the Demolition by Contract Program and 353 through the Newark Demolition Team making a total of 545 buildings demolished in the City. The shifting of personnel speeded up the operation of centralizing the legal and inspectional system that expedited the demolition program this year

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ACTIVITY SUMMARY

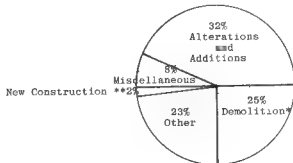
Total Inspections... 30,450
 Dwelling Inspections..... 8,478
 Violations..... 1,806



21%



Permits Issued..... 1,856



* Demolished by Newark Demolition Team;

326 structures containing 898 dwelling units and 4 commercial buildings

* Demolished by Newark Housing Authority

82 structures containing 199 dwelling units

** New residential construction for 16 dwellings to accommodate 334 families

** New non-residential construction for 24 structures

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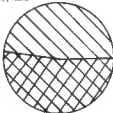
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ELECTRICAL BUREAU
Joseph Pachana

1975

During the past year the Bureau continued its inspections of electrical food vending machines, new and old construction and real estate property sold through HUD, in compliance with the 1975 Electrical Code requirements. Complaints from public and referral agencies were handled promptly and court action was taken against any violators who did not comply with the laws. By the end of the year, the Electrical Bureau had a new four part application to comply with the State Public Utilities Commission regulations.

ACTIVITY SUMMARY

TOTAL INSPECTIONS.....	22,632	
Dwelling Inspections.....	2,477	
Found in Violation.....	962	39%
		
Commercial and Other Inspections.....	2,229	
Violations Found.....	3,940	
Abated.....	2,102	
Notices Abated.....	426	
		
Electrical Permits Issued.....	2,389	
Certificates of Approval Issued.....	1,805	

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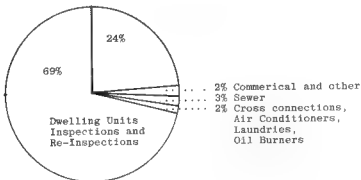
PLUMBING BUREAU
John Gesumaria

1975

The bureau was able to provide quality inspections, even with some decline in services due to a staff reduction during the first six months of the year. However, the reinstatement of one of the inspectors allowed for improved inspections services for the remainder of the year. The institution of bi-monthly staff meetings proved to be extremely advantageous. They resulted in better rapport and a format for more expeditious resolution of problems.

ACTIVITY SUMMARY

TOTAL INSPECTIONS.... 25,629



Violations Found..... 4,266
Violations Abated..... 1,955
Notices Served..... 588
Notices Abated..... 1,335
Plumbing Permits Issued..... 503
Master Plumbing Licenses Renewed. 13

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BUREAU OF INDUSTRIAL HYGIENE AND AIR POLLUTION CONTROL
Charles J. Maguire

The bureau functions as one agency with two separate responsibilities.

Industrial Hygiene

Inspects all places of employment with respect to ventilation, illumination, natural and artificial gases, fumes, vapors and mist to protect the worker from physical hazards, exposure to toxic and infectious substances and prevention of occupational diseases.

Air Pollution Control

Inspects buildings, industries, fuel burning equipment (both stationary and mobile), to prevent open burning. Issues permits for installation and makes visual determinations of smoke and its capacity. If in violation of ordinance, legal proceedings are instituted and fees imposed.

The bureau attempts to minimize and maintain air quality at a level that will not be hazardous to the health of Newark's citizens or destroy plant life and property.

1975

Inspectional activities during the year emphasized strict enforcement of the Industrial Hygiene and Air Pollution Control Ordinances. As a result; numerous violations were found, abatements obtained, and court penalties imposed for non-compliance.

Eighty-five percent (85%) of the 1975 objectives were realized, e.g. . Air Pollution Control Inspectors performed duties solely applicable thereto. A progressive movement was initiated in 1975, by the Newark Housing Authority, to remove 341 incinerators from their housing projects and replace them with compactors. This will be entirely completed in 1976 at a cost of \$2,000,000.00.

In-service training resulted in twelve (12) inspectors, two (2) Assistant Chief's and the Chief completing courses in "Community Noise Control" at Cook College, Rutgers University at no cost to the City. The aforesaid group was provided with sufficient knowledge and expertise to be certified in that area.

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ACTIVITY SUMMARY

TOTAL INSPECTIONS	27,049	
A. Industrial Hygiene Inspections	9,980	
Violations Found	2,363 (24%)	
Abatelements	789 (8%)	
Notice Served	1,589	
B. Air Pollution Inspections	13,362	
Violations Found	592 (4%)	
Abatelements	274 (20%)	
Notice Served	511	
C. Code Enforcement Inspections	3,707	
Violations Found	1,420 (38%)	
Abatelements	1,189 (32%)	
Notices Served	89	
Total Violations Referred to Other Departments	37	
Total Licenses Issued	195	
Total Permits Issued	63	
Smoke Readings	8,840	
Open Fires Put Out	63	
Interviews	382	

Violations Found 

Abatelements 

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BUREAU OF WEIGHTS AND MEASURES
Michael A. Giuliano

The Bureau of Weights and Measures inspects and tests, at least once a year, all weighing and measuring devices used in the trades in the City of Newark. If, after inspection, the device is found to be correct, a State Seal is placed upon it and the dealer is given an authorization to use it. If a device is found to be incorrect, it is condemned for repairs, which must be done within a specified period of time or removed from the premises and, in some cases, the condemned device is confiscated and destroyed.

1975

The goals and objectives projected by the Bureau of Weights and Measures for 1975 have to all intents and purposes been accomplished. During the year the inspections were increased from 100 to 102 unit inspections per man per day.

During the past year, every weighing and measuring device used in the trades in this city was inspected and tested by the Bureau of Weights and Measures to make certain that such devices were accurate at all times and of the approved type and construction, so as not to facilitate the perpetration of fraud. We have inspected thousands of labels on pre-packaged commodities to make certain that such labels are clearly informative as to the contents of such packages. Thousands of packages have been re-weighed or re-measured to ascertain whether or not the consumer is receiving the quantity represented by the manufacturer or packer. In addition to testing all meters on gasoline pumps and fuel oil trucks, a concerted effort has been made to check fuel oil deliveries enroute, to make certain that meters are properly sealed and that dealers are not resorting to "riding delivery ticket", a method used to cheat consumers.

We have thoroughly investigated all complaints and have sought out dealers with dishonest tendencies and have penalized violators, through court action, with the intent to eliminate or minimize fraudulent activities on the part of such dealers. Violators of the Weights and Measures Statutes have been taken into court and prosecuted to the extent that imposition of fines totaled \$1,325.00 during 1975.

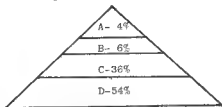
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ACTIVITY SUMMARY

Total Weighing and Measuring Inspections..... 124,885



A Visits to Retail Establishments, Delivery Tickets Examined, Complaints Investigated and Special Investigations at State's Request.

B. Weighing and Measuring Instruments

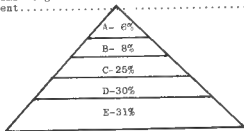
1. Tested and Sealed..... 90%
2. Condemned... 1%
3. Adjusted..... 10%

C. Labels Inspected in Food Packages

D. Packaged Foods Re-Weighed

1. Correct..... 99%
2. Incorrect..... 1%

Total Pounds of Items Weighed and Measured at the Request of the City Purchasing Department..... 379,771



A Bran, Whole Corn, Horse Feed Pellets, Molasses Feed and Oil Meal

B. Heavy Oats

C. Timothy Hay

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D. Scrap Metal

E. Coal

Trial Purchases.....(all found correct)..... 12
Packaged Foods with no Quantative Statement 539
Packaged Foods Improperly Marked..... 47
Total Permits Issued..... 4

BUREAU OF FOOD, DRUG AND MEAT CONTROL
Michael Carson

The Food, Drug and Meat Control Bureau handles the inspections of all food, drug and cosmetic operations carried on by approximately 3,500 food and drug establishments in the City of Newark. The physical inspections of the establishments are to determine the extent of compliance with all regulations and legal requirements. In many instances, the inspections are to determine the fitness of the foods, or evidence of adulteration and misbranding. In addition, routine continuous samplings are made for laboratory analysis.

1975

There were 14 inspectors assigned to the City Food, Drug and Meat Control Program at the beginning of 1975. Re-assignment during the year left the bureau with only a skeleton staff of sanitary inspectors. Utilizing the remaining manpower the bureau continued its local food and drug work. The control program included 5,610 sanitary inspections of food, drugs, cosmetics, meat, milk, ice cream and restaurants in the City of Newark. A routine, continuous sampling program (laboratory analysis, bacteriological and chemical examination of various foods) was conducted for compliance with the legal standards of City, State and Federal ordinances in determining the safety and fitness of those foods for human consumption. Samples that did not meet the standards were either condemned, salvaged or turned in for legal prosecution. The major accomplishments for this year were as follows:

Tavern survey for sanitary requirements and compliance requested by ABC licensing.

The continuing food handler's licensing program

The continuing inspections of the Summer Nutrition and Elderly Nutrition Program feeding sites.

ACTIVITY SUMMARY

TOTAL INSPECTIONS..... 8 570

Milk Licenses Issued. 847

Hearings..... 46

Condemnations..... 88

Embargoes..... 27

Food Handlers Attending Lectures..... 393

License Division Referrals

Processed..... 739

Notices Served2,115

Notices Abated .. 1,508



71%

The Bureau handled three (3) recalls with Federal, State and local cooperation (whole mullet fish, royal crest roast beef and A&D french style green beans).

BUREAU OF DOG CONTROL

Thomas P. Dunn

The Bureau of Dog Control utilizes dog wardens and ambulances to pick up all stray, sick, injured, expired, privately owned and unwanted dogs, cats and various other animals. The Bureau issued licenses and collects fees. The City pays the State 50¢ out of each licensing fee the State in turn provides free rabies vaccine. The City offers this free rabies vaccine for each licensed dog, which service is provided by participating veterinarians.

1975

During the year 1,165 dogs were vaccinated under the free rabies vaccination arrangement. The ambulances picked up 5,058 unleashed dogs and 900 stray cats, all of which were transported to the G.G. Kennels in East Newark. The Sanitation Division, using a truck provided by the Bureau of Dog Control picked up 2,302 dead dogs, 1,312 dead cats and 107 other dead animals.

ACTIVITY SUMMARY

Number of animals picked up on streets by Sanitation Department

<u>D.D.</u>	<u>D.C.</u>	<u>Total</u>
2,302	1,312	3,614

Number of animals picked up by Dog Control:

<u>Dogs</u>	<u>Cats</u>	<u>Total</u>
5,058	900	5,959
Licenses issued up to 12/31/75.....		6,583
Seeing Eye Dogs.....		1
Kennel Licenses.....		2
Pet Shop Licenses.....		1
Complaints answered on live animals.....		6,883
Calls on dead animals.....		567
Dogs vaccinated by veterinarians.....		1,165

URBAN RODENT AND INSECT CONTROL

William C. Hoggard

The Project has the mandated responsibility for the concentrated attack against the infestation of rodents and insects, and the provision of an improved and constant health maintenance level for the citizens within the specified target in the City of Newark, this is accomplished through these major activities:

- Central Control
- Cleanup (Environmental)
- Community Participation (Education and Training)
- Extermination
- Code Enforcement

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1975

The Project's funding source, as well as all its contracted projects across the country, operate on a fiscal year basis as compared to the municipal calendar year operations. Therefore, most program activities made reference to in this year end report refer to the six month period of June 1, 1975 to December 31, 1975.

The major program activity occurring during this period was the 100% comprehensive rat infestation and sanitation survey. Subsequent program activities, such as extermination and code enforcement were based upon the analysis results of the survey data. The purpose of the survey was to ascertain the status of the environmental conditions (premise prevalence rates) that support some of the elements of the rat infestation problem. The premise prevalence rates are classed in three categories, A. active rat sign percent, B. unapproved refuse storage percent, and C. exposed garbage percent. The year to year changes (percent decrease or increase) of the three classes (indicators of the problem) of premise prevalence rates, usually indicates the output benefits of the Project's program activities vis-a-vis the target area.

9,920 initial survey visits were conducted in the 15 districts of the general target area which includes, areas #1 14, 15 and 16. An additional 1,821 re-survey visits were conducted in districts 14 and 15. The extermination unit also inspected 485 sewer/manhole catch basins to determine the degree of subterranean rat infestation. The degree of control and prevention of above ground rat populations is partially determined by the proportional degree of prevention and control of subterranean rat populations. 485 sewer/manhole catch basins were treated with rodenticide

The Project experienced an unusually high number of program constraints during the first six (6) months of this operation year. Combined, it was necessary to re-program some objectives due to revisions of grant appropriations and inclement weather. By the end of the year, the project converted its data collection system to the Census Tract/Health District Plan Data Systems. Overall there was a 68% average rate of achievement of the Project's annual program objectives.

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ACTIVITY SUMMARY

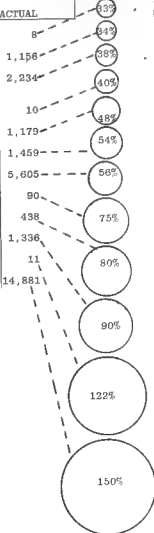
(January 1, 1975 - December 31, 1975)

PERCENT OF
ACHIEVEMENT

PROGRAM OBJECTIVES

ACTUAL

- A. To hold 24 Community Meetings.
- B. To initially inspect 3,276 Dwellings.
- C. To initially bait 5,750 Dwelling Units.
- D. To Conduct Environmental Health Programs in 25 Schools.
- E. To Conduct 2,423 Insecticide Treatments.
- F. To rebait 2,700 Dwelling Units.
- G. To Conduct 10,000 Education Visits.
- H. To Conduct 120 Sessions in 25 Schools.
- I. To bait 540 Sewer/Catch Basins.
- J. To re-inspect 1,456 Dwellings.
- K. To release 9 Public Information Articles.
- L. To Conduct 9,440 Survey - related Visits.



DIVISION OF INSPECTIONS

CHILDHOOD LEAD POISONING PREVENTION AND CONTROL
Clarence Parker

The Program identifies, tests and refers to medical institutions, children with elevated blood lead levels. Additionally, it has the responsibility of identifying the source of lead in each case and eliminating that source from the child's environment. The Bureau works in coordination with the College of Medicine and Dentistry Laboratories and the Bureau of Public Health Nursing for referrals and analyses.

1975

Due to a change in federal program direction, Newark's Childhood Lead Poisoning Prevention and Control Program reduced its 1975 screening objective in order to mount a more forceful effort of having children, detected with high blood lead levels, evaluated medically and brought under pediatric management. A recent policy statement promulgated by the Center for Disease Control in Atlanta, Georgia, defines a blood lead level of 30 micrograms per milliliters of whole blood as one requiring evaluation and follow-up care. The acceptance of this criteria more than doubled the caseload without appreciably increasing available health resources. For that reason this program has embarked upon a system of priorities.

Children determined to be at greatest risk (class IV), are referred for medical evaluation immediately upon receipt of the report of a confirmed blood test. Within two days of that report an environmental survey is conducted utilizing X-ray fluorescent analyzers which permitted environmental sampling of painted surfaces by non-destructive methods and immediate determination of the amount of lead in paint.

During 1975 the New Jersey State Department of Health Laboratory, by contract, agreed to perform analysis of a portion of the blood samples collected and submitted by this program. State Department personnel were instrumental in the training of all outreach workers in the method of drawing blood via capillary tube. This change in the method of testing, formerly the filter-paper technique, and the utilization of an erythrocyte protoporphyrin analysis in addition to the standard blood lead analysis on a single finger prick, enabled us to greatly increase the number of confirmations of high blood lead levels while at the same time eliminating the possibility of obtaining a contaminated sample.

The pediatric departments of all major hospitals were contacted in 1975 and made aware of C.D.C.'s recommendations for management of lead poisoned children. As a result of these meetings, routine feedback on the status of children at risk has increased.

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In order to reduce the incidence of children hospitalized for lead poisoning who are discharged into the same environment, a contract with Newark Services Corporation was entered into so that immediate activity toward abatement of lead paint violations could be initiated. Utilizing the services of a work crew, which goes into the dwellings of high risk children and eliminates lead paint hazards in cases where landlords are delinquent or uncooperative, the possibility of repeat lead poisoning is lessened.

The year 1975 saw the establishment of a Citizens' Advisory Board which has advisory responsibility in planning, implementing and evaluating program activities. The Board also has a direct responsibility in stimulating public education and in seeking local funding support for project activities.

During 1975 meetings were also held with the presiding Judge, Director of Health and Welfare, Complaints Processing Officer and Assistant Corporation Counsel in an effort to have lead poisoning cases placed on the court calendar more quickly, and to have stiffer fines levied on delinquent property owners, pursuant to more rapid abatements of lead paint violations. The State Legislature has also been contacted in order to have them consider legislation addressing the use of lead based paint on exterior surfaces.

A contract was made with the Newark Housing Authority and an agreement reached, whereby a high-risk child and his family will be considered a high priority for relocation into lead-free public housing whenever these dwelling units are available.

ACTIVITY SUMMARY

ENVIRONMENTAL ACTIVITIES

1. Dwelling Units Inspected.....	918
2. Dwelling Units Re-inspected.....	5,404
3. Dwelling Units on Which Notices Were Served.....	670
4. Violations Cited.....	2,244
5. Dwelling Units in Which Violations Were Abated*..	757
Voluntarily	
6. Violations Abated.....	2,548
7. Dwelling Units Referred for Legal Action.....	319
8. Violations Referred to Other Agencies.....	1,146
9. Paint Samples.....	4,788
10. X-R-F Readings.....	2,082

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SCREENING ACTIVITIES

1. New Patients for Environmental Follow-up.....	516
2 Hearings Held.....	116
3. Children Screened by Central Program Staff.....	5,374
4. Children Screened, all Sources.....	9,075
5. Children Referred for Confirmation Tests and Medical Follow-up.....	2,519

*Additional abatements obtained through court action.

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DIVISION OF PUBLIC WELFARE

Mrs. Audrey H. Messiah
DIRECTOR

DIVISION OF PUBLIC WELFARE
NEWARK, NEW JERSEY

LOCAL ASSISTANCE BOARD

CHAIRMAN

RAMON ANESES

MEMBERS

MARIE L. VILLANI

MRS. SHIRLEY GREEN

HARRY WHEELER

MRS. CHARLES O'FLAHERTY

SECRETARY

DIRECTOR

MRS. AUDREY H. MASSIAH

Newark

Kenneth A. Gibson
Mayor

Division of Public Welfare

2 Cedar Street
Newark, New Jersey 07102
201 733 7700

Audrey Massiah
Director

March 18, 1976

TO: The Honorable Kenneth A. Gibson, Mayor
Members of the City Council
Mr. James A. Buford, Director of Health & Welfare
Members of the Local Assistance Board
Citizens of Newark

I am pleased to submit the Annual Report for the Division of Public Welfare for the year 1975.

The year 1975 for the Division was a productive year in the area of planning for upgrading office efficiency and service delivery.

A decrease in labor force, due to budgetary constraints and increase in work load due to national, state and municipal economy prioritized planning for re-organization of the Agency and redistribution of the caseload. The planning was initiated with the assistance of an outside planning consultant and will be effective in early 1976.

An in-service training program for all new workers, investigators, Social Caseworkers and Social Casework Supervisors was programmed and conducted by the State Division of Public Welfare Field Representative and the office of the Director.

Increased work load up 15.5% over 1974 produced an equal increase in paper work and caused great concern for the already overcrowded space required for maintenance of case records. A more efficient plan of microfilming records was completed for implementation in 1976. Required space will be decreased from that needed for 74 file cabinets storing approximately 54,000 records to space for approximately 4 files for the same number of records.

General Assistance costs increased 43% in 1975 while cost of health care for the General Assistance population increased 49%.

Planning for a more comprehensive health care program than that now provided for the population, continued as a joint

venture of the Welfare Division, the Newark Comprehensive Health Care Programs, the Office of the Director of Health and Welfare, the office of the Director of Community Health Services and the State Division of Public Welfare.

Acknowledgements for support and guidance are extended to the non-salaried members of the Local Assistance Board, and appreciation expressed for the efforts put forth by the members of the staff.

Respectfully submitted,

Audrey H. Massiah
Mrs. Audrey H. Massiah
Director of Public Welfare
City of Newark

DIVISION OF WELFARE
Audrey Messiah

The Division of Welfare is responsible for the administration of the General Assistance Program in the City of Newark. The General Assistance Program provides financial assistance and related services to all eligible, needy persons residing in the municipality. The types of assistance provided includes monthly maintenance, health needs, travel expenses for health care, funeral expenses and emergency assistance in the event of fire, theft and other catastrophic situations.

FINANCE AND ACCOUNTING SECTION

This section is responsible for all divisional activities related to budgets and accounting needs i.e , disbursement of General Assistance and child support payments, maintenance of financial and statistical reports, authorizing vendor payments, etc.

1975 The General Assistance appropriation for 1975 amounted to \$3,900,000. The City appropriation represents only 25% of the general assistance costs. The City appropriation had to be augmented by an Emergency Appropriation of \$1,500,000. to meet increased needs. Total expenditures for 1975 amounted to \$22,123.38 The largest expenditure for eligible services was for Hospitalization which amounted to \$4,527,695.35 This represents approximately 24% of the total disbursed. The Health Plan for general assistance clients did not become a reality during 1975 and has been prioritized in goals for 1976.

The main problem encountered in meeting deadlines for financial obligations was the ever increasing clerical work load brought on by an increased case-load and reduced staff. Due to the budget cuts in personnel, planning staff needed to submit reports on a timely basis was not available, which created administrative problems in the Division.

Two changes of a financial nature which may reflect an increase in general assistance costs were,

- Revised general assistance regulations which preclude closing a case without client notification and hearings in most cases This could cause increased cost and high case retention.
- A policy memorandum, regarding issuance of duplicate checks, was formulated by the Corporation Council's office. It states that requests for duplicate assistance, where deemed necessary should be processed and referred to the Office of the Corporation for further determination of facts presented and possible follow-up by the prosecutor. This will increase costs in area of General Assistance granted.

Despite the staff cuts and increase in general assistance work load in 1975, all eligible needs were met for the General Assistance population.

FISCAL SUMMARY

	1973	1974	1975
A. NEWARK'S SHARE, GENERAL ASSISTANCE PAYMENTS			
1. Asst. Budget Appropriation	\$3,255,878	\$4,266,120	\$5,400,000
2. Administrative Cost	<u>988,784</u>	<u>1,177,866</u>	<u>864,217</u>
3. Total Newark Cost	\$4,254,662	\$5,443,986	\$6,264,217
B. GENERAL ASSISTANCE PAYMENTS, NEWARK ACTIVE CASELOAD			
	<u>\$13,299,145</u>	<u>\$15,374,970</u>	<u>\$15,756,087</u>
C. COMPARATIVE STATEMENTS-RECEIPTS AND DISBURSEMENTS GENERAL ASSISTANCE			
1. Bank Balance-Jan 1rst	\$ 777,006	\$ 447,457	\$ 296,800
2. Total Receipts	12,969,596	15,224,313	22,147,299
3. Total Disbursements*	13,299,145	15,374,970	22,123,441
4. Bank Balance December 31rst	<u>\$ 447,457</u>	<u>296,800</u>	<u>320,659</u>
	1973	1974	1975

* During the three year period, an average 70% of the total Disbursements went toward Direct Relief, with the remainder allotted to Other Relief.

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ACTIVITY SUMMARY

I. Statement of Cases Opened and Closed January 1 - December 31, 1975

A.	Total Cases Opened.....	6,503
1.	Aged-Excessive Medical Costs.....	2
2.	Temporary Illness.....	1,261
3.	Hospitalization.....	125
4.	Pending Categorical Assistance.....	255
4a.	Pending S.S.I. Benefits.....	551
5.	Insufficient Income - Unemployed.....	4,300
6.	Insufficient Income - Underemployed.....	6
7.	Other.....	3
B.	Total Cases Closed.....	5,309
1.	Death.....	167
2.	Recovery - Illness or Disability.....	3
3.	Hospitalization Terminated.....	2
4.	Receipt of Categorical Assistance.....	523
5.	Employment.....	467
6.	Increased Employment.....	1
7.	Increased Contributed Income.....	20
8.	Receipt of State/Federal Benefits.....	444
9.	Receipt of S.S.I. Benefits.....	978
10.	Other.....	2,704

II. Domestic Relations Section

A. Alimony and Child Support Collections

1973	1974	1975
\$6,215	\$6,480	\$4,373

* 30% decrease between 1973 and 1975

B. Active Welfare Cases - Hospitalization N.J. College of Medicine and Dentistry

- Patient Cases.....2,131 for 28,706 Patient Days. An Average of 13.5 Days Per Patient.
- Total Cost.....\$4,268,926 80 for \$151.00 Per Diem Cost.

C. Hospitalization Only Cases - N.J. College of Medicine and Dentistry

1. Patient Cases.....23 for 727 Patient Days
An Average of 31.6 Days Per Patient
2. Total Cost.....\$102,654.80 for \$151.00
Per Diem Cost.

PERSONNEL UNIT

This section has varied responsibilities, including supervision of personnel records, clerical assignments, general inventory control of stock room, and the annual Salary and Wages Budget. It is also the function of this office to assist the Director of Welfare with managerial plans, as well as being responsible for the general maintenance of the office.

1975 The economy of the Nation, State and City was reflected in decreased staff due to budgetary constraints. Despite a spiraling increase in workload, we were faced with a loss of 10 Social Caseworkers, 2 Welfare Investigators, 8 Clerical Workers, and a Program Manager.

Total Employees in 1975 Budget.....	95
Total C E T.A. Employees.....	31
Work Experience Personnel.....	2
D.Y.F.S. Personnel ..	5
Total 1975 Salary and Wages Appropriation..	\$840,121.00

INTAKE UNIT

The Intake Unit has the responsibility for screening and processing applications of all individuals who indicate that they are in need of benefits provided under the General Assistance rules and regulations.

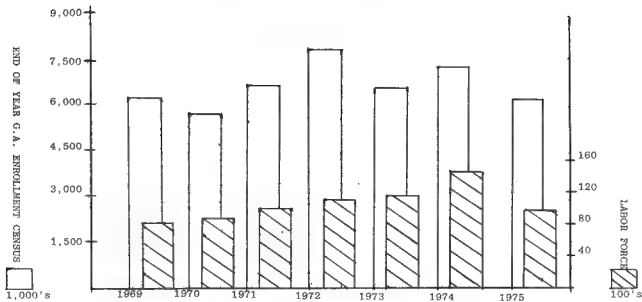
1975 The Intake Unit consists of 1 Social Caseworkers, 6 Welfare Investigators, and 1 Receptionist.

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WORKLOAD VS. LABOR FORCE
1969 - 1975



6 YEAR GROWTH PATTERN - GENERAL ASSSITANCE POPULATION

ACTIVITY SUMMARY

- A. The Intake Unit handled the following services
- 1. Persons interviewed - 197511,124.00
 - a. Applications Accepted..... 8,926
 - b. Applications Rejected..... 2,493
 - c. Amount of Petty Cash Issued.....\$1,050.00
- B. Intake Application Flow - 1975:
- 1. Persons Screened At Reception Desk... 89,454.00
 - a. Accepted..... 8,926
 - b. Rejected..... 2,493
 - c. New..... 4,548
 - d. Re-opened..... 1,897
 - e. Petty Cash..... \$1,550.00

The statistics for 1975 reflect the following increase in the Work load.

	<u>Increase over 1974</u>
Persons Interviewed.....	1,131
Applications Accepted.....	2,070

INVESTIGATIONAL UNIT

It is responsibility of this Unit to properly assign applications processed by the Intake Unit for home investigation, determination of eligibility, preparation of Budget, and final authorization for issuance of assistance, or formal rejection of case. The goal of the Hospital Eligibility Section of the Investigational Unit is to insure that medical health care is available to needy individuals where the interference of illness could appreciably lessen their capacity for normal activities or employment. They are responsible for investigating the cases referred by hospitals for financial assistance to individuals for whom they are providing medical care.

1975 The Investigational Units consist of 2 Social Caseworker Supervisors and 14 Welfare Investigators.

Our Investigational Units handled the following services

Applications Accepted	6,445
Applications Rejected	1,922
Applications Pending	584 (As of 12/31/75)

ACTIVITY SUMMARY

I. Total

A. Applications Assigned.....	8,712
B. Applications Accepted.....	6,445
C. Applications Rejected.....	1,922
D. Pending as of December 31, 1975	584

II. Increase Over 1974

A. Applications Assigned.....	1,094
B. Applications Accepted.....	584
C. Applications Rejected	250

Applications for hospital payments are investigated for eligibility under the General Assistance regulations. 23 cases were accepted for payment, representing 727 days of hospitalization, at a cost of \$102,654.80.

SOCIAL AND REHABILITATION UNITS

Through a combined effort, the Social and Rehabilitation Service Units have the responsibility to provide services to active clients, in order to prepare them for economic independence.

1975 The Social and Rehabilitation Service Units consist of 6 Social Casework Supervisors, and evenly distributed among the Supervisors, 36 Social Caseworkers.

The Year 1975 did not provide any new or additional services. Services available under General Assistance regulations continue to include, but were not limited to, planning with the client for improvement in his conditions, and referrals to available employment and training resources.

The S.R.S. staff provided identification of, and where possible, solutions to, the social needs of the clients for adequate housing, transportation for health care, provision of related health care needs, and other facilities to improve the quality of life.

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Due to a decrease in labor force and an increase in the workload, Social and Rehabilitation unit workers were no longer able to continue monthly eligibility case reviews through field visits. The Social Casework staff, through proper scheduling of their clients, were able to meet the mandate of the requirements for monthly reviews by conducting them within the office for all able bodied clients. Non-ambulatory clients were reviewed through scheduled home visits.

The end of the year caseload per worker reached an all time high average of 298 assigned active cases per Social Caseworker.

ACTIVITY SUMMARY

- A. Cases Serviced..... 94,067
- B. Cases Closed..... 5,174

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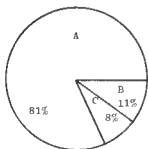
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CLIENT PROFILE

TOTAL CASES 8,666

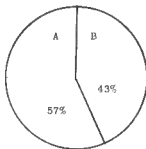
I. Cases By Ethnic Group

A. Black.....7,061
B. Hispanic 947
C. White..... 651



II. Cases By Sex

A. Male.4,934
B. Female... .3,732



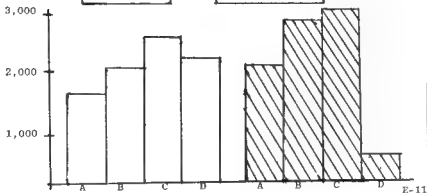
III. Cases By Age and Educational Level:

AGE

18-25
26-35
36-50
51-over

EDUCATION LEVEL

A. 0-6 Grade
B. 7-9 Grade
C. 10-12 Grade
D. 12-above



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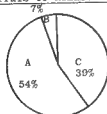
Total Caseload by Year

Year	# of Cases	% Increase
1975	8666	+ 16%*
1974	7485	+ 45%**
1973	5958	

* This figure reflects 75-74 comparison

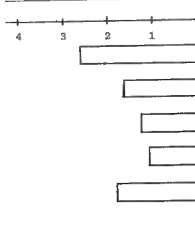
** This figure reflects 75-73 comparison

Referrals to Rehab. Services



A. Drug Abuse Treatment..	223
B. Job Training	1679
C. Education	1218
Total Referrals	3,120

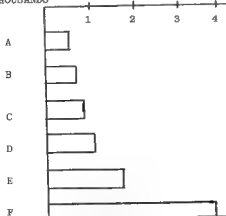
Length of General Assistance.



- A. Less Than 6 months
- B. 6-11 months
- C. 12-17 months
- D. 18-23 months
- E. 24 months & over

Length of Residence.

THOUSANDS



- A. Less than 1yr
- B. 12-23 months
- C. 24-35 months
- D. 36-59 months
- E. 60-119 months
- F. 10 yrs & over

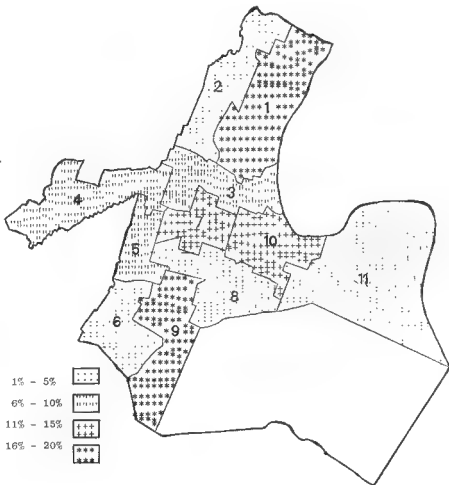
DIVISION

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TOTAL CASES 8,666

SPECIAL SERVICES SECTION

The Special Services Section provides services in the areas of Legal Settlement, Domestic Relations, Supplemental Security Income and Essex County Welfare Board Referrals, City Burials, Drug Rehabilitations and Medical Evaluation, and shares a joint responsibility with the Division of Health in the licensing of Boarding Homes for Children. The decrease in work in this unit is based on the new regulations in the Division of Youth and Family Services Program.

BOARDING HOME AND DAY CARE PROGRAMS

1975 During 1975 there were no new applications for licenses under the Boarding Home and Day Care Program for children under the age of 16 years. The Agency did re-issue 6 licenses for the day care of children. The decrease in work in this unit is based on the new regulations in the Division of Youth and Family Services program.

CITY BURIALS

1975 During the year, the Division of Welfare paid out a total of \$37,130 00 to the Directors of various funeral homes selected by members of the family or friends of the deceased.

The City Burials Unit was able to collect \$14,526.52 from the Social Security Administration and other resources.

CITY BURIAL - 1975

Adult.....	112
Children	46
Stillborns.....	35
Total	193

SUPPLEMENTAL SECURITY INCOME - ESSEX COUNTY WELFARE BOARD LIAISON

The Special Services Supplemental Security Income - Essex County Welfare Board Liaison Section acts as the liaison between the Division of Welfare, with the representative agencies administering the categorical assistance program.

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The Social Security Administration is responsible for the administration of the Supplemental Security Income program which encompasses the additional categories of Old Age Assistance and Disability Assistance

The Essex County Welfare Board administers the programs of Aid of Families of Dependent Children, and Aid to Families of Working Poor.

It is the responsibility of the Newark Division of Public Welfare to provide financial assistance to individuals who are in need, pending determination of their eligibility with the categorical programs.

It is the aim of the liaison office of this Agency to be supportive to the Casework staff in referring and maintain controls on status of all referrals with other agencies involved.

ACTIVITY SUMMARY

A. Pending - Supplemental Security Income 2,850

Pending SSI

New Referrals



B. Pending - Aid To Dependent Children..... 263

New Referrals

Pending ADC



C. Total Cases Referred 1,082

Referred to D P.W. by E.C.W.B.

Referred to D.P W. by S.S.I.



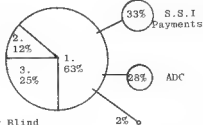
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D. Total Cases Disposed 1,429

1. Accepted by E.C.W.B. and S.S.I.
2. Denied by S.S.I. (Re-referred)
3. Closed for other reasons **



Old Age Assistance, Aid to Needy Blind

** Cases closed by D.P.W. because - Deceased, unable to locate, receiving S.S. or T.D.B. and lack of cooperation

DOMESTIC RELATIONS UNIT

1975 During the year, the Domestic Relations Unit of the Division of Public Welfare initiated one major innovation which has been suggested in prior years but finally came to fruition in 1975.

No changes were made by the Newark Municipal Court Administration in 1975 which affected the Domestic Relations Unit. However, a break through occurred following a conference held at the Essex County Probation office with Director Muriel Crawley, where it was agreed that all child support orders involving working mothers with no public agency involvement, could be transferred to the Probation Department as pay-thru cases. However, she noted that these children should be living in Essex County.

In compiling a statistical report of the cases involved, it was noted that 510 cases are active in our Cashier's office, 272 are active with the Essex County Welfare Board, and 238 are non-agency working mothers. It is these 238 cases which will be transferred to the Essex County Probation Department. The 272 Essex County Welfare Board cases will also be transferred to the Essex County Welfare Board's Legal Division who have been given lists of these cases to agreed upon during the same conference attended by a representative of that Agency. Transfer in 41 cases have already been accomplished

The following procedure is being followed to effect a transfer

1. School verification form sent to mother to verify school attendance and home address.
2. Form # 320 sent to Cashier's office to compute latest arrears

3. Summons sent to putative father and mother to appear at transfer hearing.
4. Transfer order containing all pertinent information relative to support case, presented to magistrate for signature, at which time putative father is committed to probation as a pay-thru account. New payment procedure is explained to both by attending probation officer.

The Probation Department will not accept more than 10 scheduled cases each week, therefore, the better part of 1976 will be needed before this operation can be completed.

The Unit's involvement in the transfer of the Essex County Welfare Board cases consists of cashier's computation of current arrears, and xeroxed copy of the account card, indicating payments made during the past 12 months.

Procedural change was also effected in 1975 in the acceptance on non-support orders involving active D.P.W. cases, as reimbursement of General Assistance, while providing full grants to the client. This procedure eliminates the constant changes in budgets due to non-support orders, which many times become controversial as to payment

Suggested innovation for the future is the elimination of the necessity dictated by New Jersey Statute 9-17, that paternity complaints must be accepted by the Municipal Welfare Director.

At present, since the transfer procedure was initiated, all new support orders are serviced by the Essex County Probation office, after adjudication by the Court. This might involve new legislation for a change in statute, as it presently affects all municipalities where a municipal court exists.

Fraud complaints, involving court action or reimbursement affidavits have also increased as indicated in statistical reports. Many of these cases involve much detail work for pre-grand jury with a return of "No Indictment". We were advised by the Assistant Prosecutor, Joseph Gilroy, that if possible these cases should be resolved by the Agency, especially in cases where reimbursement can be agreed upon by affidavit.

ACTIVITY SUMMARY

The following statistics reflect the receipt of \$60,287.03 in support payments during 1975.

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Child support payments continues to decrease from \$84,488.93 in 1974 to \$60,287.03. This decrease was due to the transfer of 41 cases to the Essex County Probation Department and Essex County Welfare Board, as a result of the new transfer procedure. Also, the increase in bench warrants issued against defendants, for which no payments are received.

The same condition prevails at the Newark Police Department Warrant Squad, where due to lack of personnel and priorities, civil warrants are not given much consideration.

As a result, support monies that should have been received from putative fathers are not forthcoming.

There has been a total of 6,089 contacts in all facets of Domestic Relations operations during 1975 as indicated in statistical breakdown.

A. Fraud Cases 1975

Fraud Complaints, Reimbursements.....	226
Processed (Court Action).....	122
Resolved by Affidavit.....	74
Full or Partial Restitution.....	163
Pending Cases.....	30
Pending Grand Jury Action.....	12
Restitution (Through Cashier's Office).....	<u>\$52,102.00</u>

B. Paternity Cases - 1974 to 1975 Comparison

1. 1974	\$84,488.93
2. 1975	\$60,287.03
3. Fraud Cases, Restitution 1975	\$32,748.00

C. Combined Cases Serviced In 1975

1. Paternity Cases

a. Complaints Taken ...	51	e. Filiation Orders...	39
b. "Guilty" Pleas	34	f. Persons Ineligible.	32
c. "Not Guilty" Pleas..	17	g. Termination Orders.	30
d. Paternity Trials ...	14	h. Transferred to Probation.....	7
		i. Transferred to Essex County Welfare Board.	34

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2. Contempt Cases

a. Arrears letter	297	f. Court Appearances.....	387
b. Employment Clearance.	178	g. Bench Warrants.....	186
c. School verifications.	126	h. Case Entries.....	520
d. Summons/Defendants	512	i. Letter to Attorneys...	8
e. Summons/Plaintiffs ..	496	j. Defendants Committed.....	4

3. Non -Support Cases

a. Referrals.....	64
b. Informal hearings....	13
c. Formal hearings.....	51

4. Fraud Complaints

a. Referrals.....	240
b. Processed (court action).....	142
c. Affidavits.....	98
d. Grand Jury Appear- ances.....	24

DRUG ABUSE REHABILITATION PROGRAM

1975 The Division of Public Welfare assists residents of Drug Centers in the City. Active General Assistance clients include residents of Integrity House, 45 and 99 Lincoln Park, and Newark Renaissance, 15 Roseville Avenue.

Applicants for General Assistance are interviewed at the residences, and appropriate action taken by the Agency in accepting or rejecting the application. Stress is placed upon the place of legal residence, income of legally responsible relatives, and health problems.

While at the Drug Residences, clients receive therapy through group sessions, some for extended periods of time. During their stay, a member of our staff who supervises these cases, visits each client once a month to evaluate continued need for assistance.

During the early part of 1975, Odyssey House another drug residency, was closed and all assistance terminated to previously eligible recipients residing there.

The staff accepted 173 cases, rejected 47 applications, and closed 162 cases

As of December 31, 1975 there were 82 active and 4 pending cases in the unit.

We have observed that many residents are sent to the Newark Drug Centers from areas far removed from this city. These referrals usually are the result of Court action. This places an additional financial burden upon Newark, when the same or similar service could possibly be given within the area where the client resides. This would enable the Newark Drug Centers to accomodate our residents in preference to non-residents.

MEDICAL EVALUATION CENTER

1975 The Medical Evaluation Center continues to be a joint venture of the Division of Public and Community Health Service and Division of Welfare.

The medical staff was decreased in 1975 to 1 physician and 1 nurse, both supplied by the Division of Health. The Division of Welfare provided 1 member of the Social Casework staff, and 1 clerical worker. The Medical Evaluation Center in 1974 had a supervising Physician and 2 examining Physicians.

On the basis of the examinations and laboratory findings, a diagnosis and prognosis are established by the medical staff, to be used by the Social Casework Staff, for referrals to appropriate assistance programs.

During 1975 the Division of Welfare continued the use of the Gladys Dickinson Health Center, the Bessie Smith Health Center, the Timothy Still Health Center, and the North Jersey Community Health Center, as well as the Health Services Delivery Sub System, for medical evaluations of the clients, for determination of physical condition for proper referral to other programs.

The Director of the Department of Health and Welfare, and the respective Directors of the Divisions of Health and Welfare continued during 1975 to work toward the goal of implementing a more comprehensive health care program in conjunction with the Federally funded Newark Comprehensive Health Care Plan, in an attempt to give our clients the advantages of preventive health care.

ACTIVITY SUMMARY

A Estimated Length of Disability

1. Less than 2 months
2. 2 to 6 months
3. Over 6 months
4. Over 1 year

5. Total Clients..... 1,198



- B. Appointments Scheduled2,001
- C. Appointments Cancelled..... 74 or 7% cancellation rate.
- D. Clients Examined..... 1,190
- E. Clients Failed737 or 62% failure rate.

LEGAL SETTLEMENT UNIT

The Legal Settlement Unit is an essential element within the Agency, and is required as a part of the Poor Law, New Jersey Revised Statute 44.8A1, and functions in accordance with the Statute.

It is the responsibility of this Unit to provide our municipality with the service of providing transportation to transients who are stranded within our City, but possess legal residence elsewhere.

The Legal Settlement Section is responsible for determining financial responsibility for cases brought to our attention by other municipalities, for persons who have legal residence in Newark for purposes of General Assistance. In such cases, Newark assumes financial responsibility, although the case is serviced by the respective municipality in which the client is residing when application for assistance is made. The Legal Settlement Section maintains case records where Newark has legal responsibility for cases being serviced by another municipality.

When Newark services a case possessing no legal residence in the State of New Jersey, reimbursement is received from the State Division of Welfare in the amount of 80% of total cost, as opposed to the reimbursement rate of 75% on regular General Assistance cases. 100% reimbursement is received for cases with legal residence in other New Jersey municipalities.

ACTIVITY SUMMARY

SETTLEMENT CASES INVOLVING INTER AND INTRA STATE ACTION; A 5 YEARS COMPARISON

	<u>1971</u>	<u>1972</u>	<u>1973</u>	<u>1974</u>	<u>1975</u>
1. Intra-State settlement questions	375	384	357	347	364
2. Allegations sent by Newark D P.W.	329	238	179	160	221
2A. Acknowledgements received in response to #2	222	219	163	140	206

SETTLEMENT CASES INVOLVING INTER AND INTRA STATE ACTION
A 5 YEAR COMPARISON CONTD.

	<u>1971</u>	<u>1972</u>	<u>1973</u>	<u>1974</u>	<u>1975</u>
3. Allegations received by Newark D.P.W.	288	334	327	370	484
3A. Acknowledgements sent in response to #3	259	314	274	296	295
3B. Protests sent in response to #3	29	48	53	74	189
4. Non - State cases referred to Trenton	445	334	501	699	544
5. Non - State cases active in files	239	280	341	604	655
6. Inquiries received re. former Newark residents	143	123	95	79	120
7. Transients returned to other states	122	78	72	30	19
7A. Non - State reimbursable transients (of # 7)	155	70	68	30	19
8. Intra - State transients	380	68	57	11	6

CENTRAL CLEARANCE - RECORDS AND DOCUMENTS UNIT

The Central Clearance - Records and Documents Unit is a centralized clearing center for the Newark Division of Welfare. It is a repository for all inactive cases. Active case records are maintained in the respective Social and Rehabilitation Section unit to which the cases are assigned for supervision and servicing.

1975 Because of the volume of work involved in the maintenance of the case records, the amount of space required for housing the records, and the outdated method which the Division has outgrown due to the increased workload, we sought professional evaluation for improvement.

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As a result, in the year 1975 a plan for microfilming closed case records was developed with the assistance of the Department of Engineering. The Division of Welfare was selected for a demonstration project to show the feasibility of using the microfilming method throughout City Divisions.

The project is scheduled to be implemented in the first quarter of 1976.

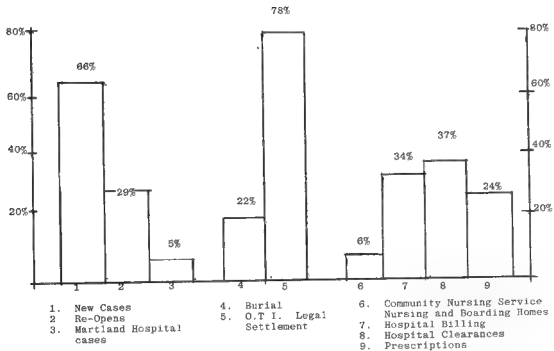
ACTIVITY SUMMARY

A.	Number of searches made (1975)	105,796
B.	Closed File Operations	12,358
	1. Cases pulled	5,268
	2. Cases filed	7,090

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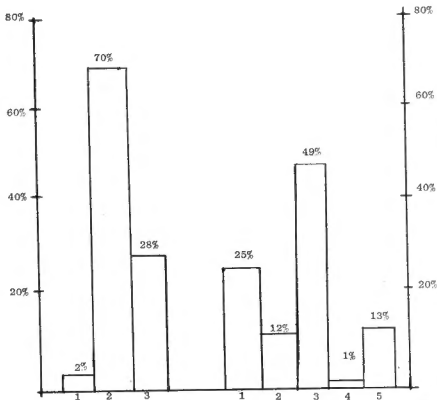
C. APPLICATION CLEARANCES 17.177

D. SPECIAL AND MISCELLANEOUS
Clearances 21,549

1. Disability Assistance
Aid to Dependent
Children Housing
2. Information Clearances
3. Miscellaneous Clearances

E. FILE AND MAINTENANCE -
071's (462's - 475's).
14,172

1. New Cases
2. Re-Opens
3. Closed Cases
4. Miscellaneous Changes
5. Address Changes



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STENOGRAPHIC UNIT

The Stenographic Unit has the responsibility for performing numerous and varied assignments, such as the transcription of complete recorded case histories, typing of correspondence and detailed clerical work for the General Assistance Program of the Division of Public Welfare.

The Unit receives all social case studies upon completion of the investigation and evaluation of the application for Public Assistance by the Social Caseworker. The case record material is then set up in chronological order, and various letters and forms are typed and sent out to substantiate eligibility for financial aid.

The financial books of the Division of Welfare are closed each month, and the Unit is required to submit a monthly report to the Director of Welfare, including the pending cases, and a list of active cases due for dictation during the current month.

1975 Due to budgetary constraints, the staff of the Stenographic Unit was cut in half for a greater part of 1975. The total production rate achieved by the Unit during 1975 is as follows:

Cases transcribed	4,003
Miscellaneous Work	9,883
Lines typed	148,227

A report covering a three year period of the work output of the Unit is listed below:

ACTIVITY SUMMARY

<u>Activity</u>	<u>Three year accumu- lated total: 1973-1975</u>	<u>Handled In 1975</u>
1. Openings, Re-openings, Rejects.....	22,839.....	38%
2. Social Case Studies and Chronos	5,925	31%
3. Closing Summaries	24	21%
4. Additional Information	530	37%
5. Re-instatements	56	7%
6. Transfers	1,854	34%
7. Form 288	974	29%

	<u>Accumulated total</u> <u>1973 - 1975</u>	<u>Handled</u> <u>In 1975</u>
8. Form 462A Closings	13,596	37%
9. Employment Clearances	3,659	15%
10. Relative Contact Letters	965	5%
11. Miscellaneous Letters	446	26%
12. Redomiciles	1,367	47%
13. Re-investigations	469	11%
14. Fraud Cases	120	58%
15. Rescind Rejects	91	59%

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